## Case 18-06859 Doc 1 Filed 03/09/18 Entered 03/09/18 13:06:29 Desc Main Document Page 1 of 58

| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | =                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | Chapter 13                      | Check if this an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1:   | Identify Yourself   |  |   |
|----|---|---|--|---|
|    |   |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1. | You   | r full name   |  |   |
|    | your<br>pictu<br>exar<br>licer<br>Bring<br>iden | e the name that is on a government-issued ure identification (for nple, your driver's use or passport).  g your picture tification to your ting with the trustee. | Jean First name  M Middle name  Jones Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
| 2. | use<br>Inclu                                    | other names you have<br>d in the last 8 years<br>ade your married or<br>den names.  |  |   |
| 3. | you<br>num<br>Indi                              | y the last 4 digits of<br>r Social Security<br>aber or federal<br>vidual Taxpayer<br>utification number   | xxx-xx-6447  |   |

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Case number (if known)

Debtor 1 Jean M Jones

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 100 Park Ave, Unit 509 Calumet City, IL 60409 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Jean M Jones

| 7.  | The chapter of the  | Your Bankruptcy Case  Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy |                |  |           |                       |  |                                |  |  |
|-----|---|--|----------------|--|-----------|-----------------------|--|--------------------------------|--|--|
|     | Bankruptcy Code you are   |  |                |  |           |                       |  |                                |  |  |
|     | choosing to file under  |  |                |  |           |                       |  |                                |  |  |
|     |   | ☐ Ch   | apter 11       |  |           |                       |  |                                |  |  |
|     |   | ☐ Ch   | apter 12       |  |           |                       |  |                                |  |  |
|     |   | ■ Ch   | apter 13       |  |           |                       |  |                                |  |  |
| 8.  | How you will pay the fee  | ;<br>(   | about how yo   | entire fee when I file my per<br>u may pay. Typically, if you ar<br>attorney is submitting your pa<br>address. | e paying  | the fee yourself,     | you may pay with cash  | n, cashier's check, or money   |  |  |
|     |   |  |                | the fee in installments. If you in Installments (Official Form   |           | e this option, sign   | option, sign and attach the Application for Individuals to Pay |                                |  |  |
|     |   |  | request tha    | t my fee be waived (You may<br>uired to, waive your fee, and n   | request   | this option only if   | you are filing for Chap  | oter 7. By law, a judge may,   |  |  |
|     |   | á  | applies to you | ir family size and you are unal<br>ir family size and you are unal<br>in to Have the Chapter 7 Filing          | ble to pa | y the fee in installi | ments). If you choose  | this option, you must fill out |  |  |
|     |   |  |                |  |           |                       |  |                                |  |  |
| 9.  | Have you filed for bankruptcy within the  | □ No.  |                |  |           |                       |  |                                |  |  |
|     | last 8 years?   | Yes  |                | No de la Blacka de   |           |                       |  |                                |  |  |
|     |   |  | District       | Northern District of IL, Eastern Division  | When      | 9/15/17               | Case number  | 17-27621                       |  |  |
|     |   |  | District       |  | -<br>When |                       | Case number  |                                |  |  |
|     |   |  | District       |  | When      |                       | Case number  |                                |  |  |
| 10  | Are any bankruptcy  |  |                |  |           |                       |  |                                |  |  |
| 10. | cases pending or being  | ■ No   |                |  |           |                       |  |                                |  |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes  | i.             |  |           |                       |  |                                |  |  |
|     |   |  | Debtor         |  |           |                       | Relationship to y  | /ou                            |  |  |
|     |   |  | District       |  | When      |                       | Case number, if  | known                          |  |  |
|     |   |  | Debtor         |  |           |                       | Relationship to y  | /ou                            |  |  |
|     |   |  | District       |  | _ When    |                       | Case number, if  | known                          |  |  |
| 11. | Do you rent your  | ■ No.  | Go to li       | ne 12.   | <u> </u>  |                       |  |                                |  |  |
|     | residence?  | ☐ Yes  | . Has yo       | ur landlord obtained an eviction   | on judgm  | ent against you?      |  |                                |  |  |
|     |   |  |                | No. Go to line 12.   |           |                       |  |                                |  |  |
|     |   |  |                | Yes. Fill out Initial Statement  | About or  | Eviction Judame       | ent Against You (Form  | 101A) and file it as part of   |  |  |

Case 18-06859 Doc 1 Filed 03/09/18 Entered 03/09/18 13:06:29 Desc Main Document Page 4 of 58 Case number (if known) Debtor 1 Jean M Jones Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? ■ No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Jean M Jones**Document Page 5 of 58

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

| I received a briefing from an approved credit             |
|---|
| counseling agency within the 180 days before I filed      |
| this bankruptcy petition, and I received a certificate of |
| completion.   |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | otor 1 <b>Jean M Jones</b>                                     |                            |   |                                  | Case number                    | (if known)  |  |  |  |
|-----|--|----------------------------|---|----------------------------------|--------------------------------|---|--|--|--|
| Par | t 6: Answer These Quest  | ions for Repo              | orting Purposes   |                                  |                                |   |  |  |  |
| 16. | What kind of debts do you have?                                |                            | a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incuindividual primarily for a personal, family, or household purpose."                  |                                  |                                |   |  |  |  |
|     |  |                            | No. Go to line 16b.   |                                  |                                |   |  |  |  |
|     |  |                            | Yes. Go to line 17.   |                                  |                                |   |  |  |  |
|     |  |                            | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  |                                  |                                |   |  |  |  |
|     |  |                            | No. Go to line 16c.   | ŭ                                | •                              |   |  |  |  |
|     |  |                            | Yes. Go to line 17.   |                                  |                                |   |  |  |  |
|     |  | 16c. St                    | ate the type of debts you o   | owe that are not consun          | ner debts or business          | debts   |  |  |  |
|     |  |                            |   |                                  |                                |   |  |  |  |
| 17. | Are you filing under Chapter 7?                                | ■ No. I a                  | am not filing under Chapter   | 7. Go to line 18.                |                                |   |  |  |  |
|     | Do you estimate that after any exempt property is excluded and |                            | am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative experare paid that funds will be available to distribute to unsecured creditors? |                                  |                                |   |  |  |  |
|     | administrative expenses  |                            | l No  |                                  |                                |   |  |  |  |
|     | are paid that funds will be available for                      |                            | l Yes   |                                  |                                |   |  |  |  |
|     | distribution to unsecured creditors?                           |                            |   |                                  |                                |   |  |  |  |
| 18. | How many Creditors do  | <b>■</b> 1-49              |   | <b>1</b> ,000-5,000              |                                | ☐ 25,001-50,000   |  |  |  |
|     | you estimate that you owe?                                     | ☐ 50-99                    |   | <b>5001-10,000</b>               | )                              | <b>5</b> 0,001-100,000  |  |  |  |
|     |  | □ 100-199<br>□ 200-999     |   | 10,001-25,00                     | 00                             | ☐ More than100,000  |  |  |  |
| 19. | How much do you  | □ \$0 - \$50.              |   | □ \$1,000,001 -                  | - \$10 million                 | □ \$500,000,001 - \$1 billion   |  |  |  |
|     | estimate your assets to  | ■ \$50,001 ·               |   | □ \$10,000,001                   |                                | ☐ \$1,000,000,001 - \$10 billion  |  |  |  |
|     | be worth?  | □ \$100,001                |   |                                  | □ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion   |  |  |  |
|     |  | □ \$500,001                | - \$1 million   | □ \$100,000,00                   | 11 - \$500 million             | ☐ More than \$50 billion  |  |  |  |
| 20. | How much do you estimate your liabilities                      | <b>\$0 - \$50</b> ,        | 000   | <b>\$1,000,001</b>               |                                | \$500,000,001 - \$1 billion   |  |  |  |
|     | to be?   | \$50,001                   | · · · ·   | □ \$10,000,001<br>□ \$50,000,001 |                                | ☐ \$1,000,000,001 - \$10 billion<br>☐ \$10,000,000,001 - \$50 billion               |  |  |  |
|     |  | □ \$100,001<br>□ \$500,001 |   | □ \$100,000,001                  |                                | ☐ More than \$50 billion  |  |  |  |
| Par | t 7: Sign Below  |                            |   |                                  |                                |   |  |  |  |
| _   | you  | I have exam                | ined this petition, and I dec   | clare under penalty of p         | perjury that the information   | ation provided is true and correct.   |  |  |  |
|     |  | If I have cho              | sen to file under Chapter 7   | , I am aware that I may          | / proceed, if eligible, ι      | under Chapter 7, 11,12, or 13 of title 11,  |  |  |  |
|     |  | United State               | s Code. I understand the re   | elief available under ea         | ach chapter, and I cho         | ose to proceed under Chapter 7.   |  |  |  |
|     |  |                            | y represents me and I did r<br>have obtained and read th  |                                  |                                | an attorney to help me fill out this  |  |  |  |
|     |  | I request reli             | ief in accordance with the c  | chapter of title 11, Unite       | ed States Code, speci          | fied in this petition.  |  |  |  |
|     |  | bankruptcy of and 3571.    | case can result in fines up t   |                                  |                                | property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |  |  |
|     |  | /s/ Jean M<br>Jean M Jo    |   |                                  | Signature of Debtor            | 2   |  |  |  |
|     |  | Signature of               |   |                                  | orginature or Debitor          | -   |  |  |  |
|     |  | Executed on                |   |                                  | Executed on                    |   |  |  |  |
|     |  |                            | MM / DD / YYYY  |                                  | MM /                           | DD / YYYY   |  |  |  |

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Debtor 1 Jean M Jones Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Kevin [     | D. Rouse ARDC            | Date          | March 7, 2018          |
|-----------------|--------------------------|---------------|------------------------|
| Signature of    | f Attorney for Debtor    |               | MM / DD / YYYY         |
| Kevin D. F      | Rouse ARDC #6284394      |               |                        |
| Ledford, V      | Vu & Borges, LLC         |               |                        |
| Firm name       |                          |               |                        |
| 105 W. Ma       | ndison                   |               |                        |
| 23rd Floor      | r                        |               |                        |
| Chicago, I      | IL 60602                 |               |                        |
| Number, Street, | , City, State & ZIP Code |               |                        |
| Contact phone   | 312-853-0200             | Email address | notice@billbusters.com |
| #6284394        | IL                       |               |                        |
| Bar number & S  | State                    |               | <del></del>            |

|   |                         |                   | <u> </u>    |                       |
|---|-------------------------|-------------------|-------------|-----------------------|
| Fill in this infor                      | mation to identify your | case:             |             |                       |
| Debtor 1                                | Jean M Jones            |                   |             |                       |
|   | First Name              | Middle Name       | Last Name   |                       |
| Debtor 2                                |                         |                   |             |                       |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name   |                       |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number                             |                         |                   |             |                       |
| (if known)                              |                         |                   |             | ☐ Check if this is an |
|   |                         |                   |             | amended filing        |

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your as<br>Value o | ssets<br>f what you own       |
|-----|--|--------------------|-------------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$                 | 39,892.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$                 | 17,550.00                     |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$                 | 57,442.00                     |
| Par | t 2: Summarize Your Liabilities  |                    |                               |
|     |  |                    | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$                 | 30,992.92                     |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$                 | 686.28                        |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$                 | 8,179.4                       |
|     | Your total liabilities   | \$                 | 39,858.66                     |
| Par | t 3: Summarize Your Income and Expenses  |                    |                               |
| ١.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$                 | 2,044.00                      |
| j.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$                 | 1,259.0                       |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |                    |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sch       | nedules.                      |
|     | ■ Yes  |                    |                               |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

968.49 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | im     |
|--|-----------|--------|
| From Part 4 on Schedule E/F, copy the following:   |           |        |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00   |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 686.28 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00   |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00   |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00   |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00   |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 686.28 |

|                              | Cas  | se 18-06859                                    | Doc 1  | Filed 03/0                            |                                       | Entered 03/09/1<br>Page 10 of 58  | 8 13:06:29                                | Desc        | c Main   |
|------------------------------|--|--|--|---------------------------------------|---------------------------------------|---|---|-------------|--|
| =                            | in this inform   | ation to identify                              | your case and th   |                                       |                                       | 1 000. 10 01 50   |   |             |  |
| Deb                          | otor 1   | Jean M Jone                                    |  | e Name                                |                                       | Last Name   |   |             |  |
|                              | otor 2<br>use, if filing)  | First Name                                     |  | e Name                                |                                       | Last Name   |   |             |  |
| Unit                         | ted States Ban   | kruptcy Court for                              | the: NORTHER   | N DISTRICT                            | OF ILLIN                              | IOIS  |   |             |  |
|                              | se number  |  |  |                                       |                                       | -   |   | С           | Check if this is an amended filing                                     |
| n ea<br>hink<br>nfor<br>unsw | ch category, se<br>it fits best. Be<br>mation. If more<br>ver every questi | as complete and a<br>space is needed, a<br>on. | escribe items. List<br>accurate as possibl<br>attach a separate si | le. If two marric<br>heet to this for | ed people<br>m. On the                | n asset fits in more than one<br>are filing together, both are<br>top of any additional pages<br>n or Have an Interest In | equally responsib                         | le for supp | lying correct  |
|                              | No. Go to Part : Yes. Where is   |  |  | What is the                           | property                              | <b>?</b> Check all that apply   |   |             |  |
|                              | 100 Park A<br>Unit 509<br>Street address, if                               | ve. available, or other desc                   | cription   | ☐ Dupl                                |                                       | ome<br>i-unit building<br>or cooperative  | the amount of an                          | y secured o | ns or exemptions. Put<br>claims on Schedule D:<br>Secured by Property. |
|                              | Calumet Ci   | ty IL<br>State                                 | <b>60409-0000</b> ZIP Code   | Land                                  | stment pro                            |   | Current value of entire property? \$39,85 | 2.00        | Current value of the portion you own? \$39,892.00                      |
|                              | Cook   |  |  | ■ Debt                                | '                                     | in the property? Check one  |   | ıple, tenan | cy by the entireties, or   |
|                              | County   |  |  | ☐ Debt                                | or 1 and E<br>ast one of<br>mation yo | Debtor 2 only the debtors and another bu wish to add about this iter on number:   | (see instructio                           |             | unity property   |
|                              |  |  |  |                                       |                                       |   |   |             |  |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$39,892.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Deb              | tor 1 <b>_J</b> | ean M Jon   | es   | Document Page 11 of 58                                   | se number (if known)       |   |
|------------------|-----------------|---|--|--|----------------------------|---|
| 3. <b>C</b> a    | ars, vans,      | trucks, trac                                      | tors, sport utility ve   | hicles, motorcycles                                      |                            |   |
|                  | No              |   |  |  |                            |   |
|                  | Yes             |   |  |  |                            |   |
|                  |                 |   |  |  |                            |   |
| 3.1              | Make:           | Hyundai   |  | Who has an interest in the property? Check one           |                            | claims or exemptions. Put red claims on Schedule D:   |
|                  | Model:          | Elantra   |  | Debtor 1 only  |                            | aims Secured by Property.   |
|                  | Year:           | 2016  |  | Debtor 2 only  | Current value of the       | Current value of the  |
|                  |                 | nate mileage:                                     | 47,000   | ☐ Debtor 1 and Debtor 2 only                             | entire property?           | portion you own?  |
|                  |                 | formation:  |  | At least one of the debtors and another                  |                            |   |
|                  | Value           | Per NADA  |  | ☐ Check if this is community property (see instructions) | \$13,100.00                | \$13,100.00   |
| 5 A .p Part Do y | 3: Descri       | be Your Person have any logoods and Major applian | ed for Part 2. Write to part and Household Ite legal or equitable into | terest in any of the following items?                    |                            | \$13,100.00  Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|                  | Yes. De         | scribe  | Misc used hous   | sehold goods and furnishings,                            |                            | \$2,788.00  |
|                  |                 | Televisions a<br>including cel                    | and radios; audio, vide<br>I phones, cameras, m                        | , , , , , , , , , , , , , , , , , , ,                    | s, scanners; music collec  | tions; electronic devices \$1,000.00  |
|                  |                 |   |  |  |                            |   |
|                  | xamples:        | other collecti                                    | I figurines; paintings, ons, memorabilia, co                           |  | objects; stamp, coin, or b | aseball card collections;   |
|                  |                 |   |  |  |                            |   |
| E                | xamples:        | musical instr                                     | ographic, exercise, an   | nd other hobby equipment; bicycles, pool tables, golf    | clubs, skis; canoes and l  | kayaks; carpentry tools;  |

Official Form 106A/B Schedule A/B: Property page 2

| Dr        | ebtor 1                                      |   | 18-06859   | Doc 1                               | Filed 03/09/18<br>Document                           | Entered 03/09/18 13:06:29<br>Page 12 of 58<br>Case number (if known) | Desc Main  |
|-----------|--|---|--|-------------------------------------|--|--|--|
|           | Firearm                                      | Jean M 、<br>ns  | Jones  |                                     |  | Case number (if known)   |  |
|           | Examp  ■ No                                  |   |  | , ammunition                        | n, and related equipmen                              | t  |  |
|           | Clothes                                      |   |  |                                     |  |  |  |
|           | Examp  ☐ No                                  |   |  | leather coats                       | s, designer wear, shoes                              | accessories  |  |
|           |  |   |  | ary Wearin                          | g Apparel  |  | \$400.00   |
|           |  |   | <u> </u>   |                                     |  |  |  |
|           | □ No   |   |  | ume jewelry,                        | engagement rings, wed                                | ding rings, heirloom jewelry, watches, gems, q                       | gold, silver   |
|           |  |   | Costum   | e Jewelry                           |  |  | \$200.00   |
| 14.<br>15 | Examp No Yes. Any oth No Yes. Any oth for Pa | Describe her persona Give specifi he dollar va ert 3. Write | cats, birds, horse  al and househo  ic information  alue of all of yo that number he | old items you<br><br>our entries fr |  |  | \$4,438.00  Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|           | □ No ′                                       | ,   | ,  | . ,                                 | our home, in a safe depo                             | osit box, and on hand when you file your petiti                      | on   |
|           |  |   |  |                                     |  | Cash   | \$12.00  |
|           | Examp  □ No                                  |   | ng, savings, or coons. If you have   |                                     | I accounts; certificates of counts with the same ins |  | houses, and other similar  |
|           |  |   | 17.1.  | Credit Unic                         | on HealthCa  | re Credit Union  | \$0.00   |
|           | Examp  ■ No                                  |   | ·  | t accounts wi                       | ith brokerage firms, mor                             | ney market accounts  |  |
|           | □ Yes  |   | In   | nstitution or is                    | suer name:   |  |  |

Official Form 106A/B Schedule A/B: Property page 3

|     |                           | Case 18-06859   | Doc 1                           | Filed 03/09/18<br>Document                                 | Entered 03/09/18 13:06:29<br>Page 13 of 58  | Desc Main  |
|-----|---------------------------|---|---------------------------------|--|---|--|
| De  | ebtor 1                   | Jean M Jones  |                                 | Document   | Case number (if known)  |  |
| 19. | joint ve                  |   | interests in ir                 | ncorporated and uninco                                     | orporated businesses, including an interes  | t in an LLC, partnership, and  |
|     | ■ No                      |   |                                 |  |   |  |
|     | ⊔ Yes.                    | Give specific information<br>Na   | about them<br>me of entity:     |  | % of ownership:   |  |
| 20. | Negotia<br>Non-ne<br>■ No | able instruments include  | personal check<br>those you can |  | egotiable instruments hissory notes, and money orders. by signing or delivering them. |  |
|     |                           | Iss   | uer name:                       |  |   |  |
| 21. |                           | nent or pension accoun<br>les: Interests in IRA, ERI                            |                                 | 1(k), 403(b), thrift saving                                | s accounts, or other pension or profit-sharing  | plans  |
|     |                           | _ist each account separa  | telv.                           |  |   |  |
|     |                           |   | of account:                     | Institution n  | ame:  |  |
| 22. | Your sh                   | y deposits and prepayr<br>nare of all unused deposi<br>les: Agreements with lan | its you have ma                 | ade so that you may cont<br>I rent, public utilities (elec | inue service or use from a company<br>stric, gas, water), telecommunications compan   | nies, or others  |
|     |                           |   |                                 | Institution n  | ame or individual:  |  |
| 23. |                           | es (A contract for a perio  | odic payment of                 | f money to you, either for                                 | life or for a number of years)  |  |
|     | ■ No<br>□ Yes             | lssuer nan  | ne and descript                 | tion.  |   |  |
| 24. | 26 U.S.C                  | s in an education IRA, i<br>C. §§ 530(b)(1), 529A(b),                           |                                 |  | gram, or under a qualified state tuition pro  | ogram.   |
|     | ■ No<br>□ Yes             | Institution   | name and desc                   | cription. Separately file th                               | e records of any interests.11 U.S.C. § 521(c):  |  |
| 25. | Trusts,                   | equitable or future inte  | erests in prope                 | erty (other than anythin                                   | g listed in line 1), and rights or powers exe   | ercisable for your benefit   |
|     | ☐ Yes.                    | Give specific information   | about them                      |  |   |  |
| 26. | _Examp                    |   |                                 | ets, and other intellectu<br>proceeds from royalties a     |   |  |
|     | ■ No<br>□ Yes.            | Give specific information   | about them                      |  |   |  |
| 27. |                           | es, franchises, and other   |                                 |  | n holdings, liquor licenses, professional licens                                      | es   |
|     | ■ No                      | Give specific information   |                                 |  |   |  |
| M   | oney or p                 | property owed to you?   |                                 |  |   | Current value of the   |
|     |                           |   |                                 |  |   | <ul><li>portion you own?</li><li>Do not deduct secured claims or exemptions.</li></ul> |
| 28. | Tax refu                  | unds owed to you  |                                 |  |   |  |
|     | ☐ Yes. 0                  | Give specific information   | about them, in                  | cluding whether you alrea                                  | ady filed the returns and the tax years   |  |
|     | Fe"                       |   |                                 |  |   |  |
| 29. | Family Examp              |   | m alimony, spo                  | usal support, child suppo                                  | ort, maintenance, divorce settlement, property  | settlement   |

Official Form 106A/B Schedule A/B: Property page 4

 $\square$  Yes. Give specific information.....

|     |  | Case 18-068  | 59 Do           | c 1        | Filed 03/09/18            | Entered 03/09/18 13:06:29                                    | Desc Main                 |
|-----|--|--|-----------------|------------|---------------------------|--|---------------------------|
| De  | btor 1   | Jean M Jones   |                 |            | Document                  | Page 14 of 58  Case number (if known)                        |                           |
| ļ   | 30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No   |  |                 |            |                           |  |                           |
|     |  | Give specific informa  |                 |            |                           |  |                           |
|     | Exam <sub>i</sub><br>■ No  | sts in insurance police ples: Health, disability,  Name the insurance of | or life insur   | each pol   |                           | HSA); credit, homeowner's, or renter's insuran  Beneficiary: | ce<br>Surrender or refund |
|     |  |  | Company in      | iamo.      |                           | Beneficiary.   | value:                    |
|     | <ul> <li>32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information</li> </ul> |  |                 |            |                           |  |                           |
|     | <ul> <li>33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue</li> <li>■ No</li> <li>□ Yes. Describe each claim</li> </ul>  |  |                 |            |                           |  |                           |
|     | 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims  ■ No □ Yes. Describe each claim  |  |                 |            |                           |  |                           |
|     | 35. Any financial assets you did not already list  ■ No □ Yes. Give specific information   |  |                 |            |                           |  |                           |
| 36. |  |  |                 |            |                           | ny entries for pages you have attached                       | \$12.00                   |
| Par | t 5: De  | escribe Any Business-Re  | elated Proper   | rty You C  | Own or Have an Interest I | n. List any real estate in Part 1.                           |                           |
| 37. | Do you   | own or have any legal o  | or equitable in | nterest ir | any business-related pr   | operty?  |                           |
|     | No. Go   | o to Part 6.   |                 |            |                           |  |                           |
|     | Yes. (   | Go to line 38.   |                 |            |                           |  |                           |
| Par | Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.  |  |                 |            |                           |  |                           |
| 46. | Do you   | u own or have any leg  | gal or equit    | able int   | erest in any farm- or c   | commercial fishing-related property?                         |                           |
|     |  | . Go to Part 7.  |                 |            |                           |  |                           |
|     | ☐ Yes  | s. Go to line 47.  |                 |            |                           |  |                           |
| Par | t 7:   | Describe All Property  | / You Own or    | Have ar    | Interest in That You Did  | Not List Above   |                           |
|     |  | u have other property<br>ples: Season tickets, c                         |                 |            |                           |  |                           |

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

 $\square$  Yes. Give specific information.......

\$0.00

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Case number (if known)

Document Debtor 1 Jean M Jones

| Part | 8: List the Totals of Each Part of this Form                 |             |                              |             |
|------|--|-------------|------------------------------|-------------|
| 55.  | Part 1: Total real estate, line 2                            |             |                              | \$39,892.00 |
| 56.  | Part 2: Total vehicles, line 5                               | \$13,100.00 |                              |             |
| 57.  | Part 3: Total personal and household items, line 15          | \$4,438.00  |                              |             |
| 58.  | Part 4: Total financial assets, line 36                      | \$12.00     |                              |             |
| 59.  | Part 5: Total business-related property, line 45             | \$0.00      |                              |             |
| 60.  | Part 6: Total farm- and fishing-related property, line 52    | \$0.00      |                              |             |
| 61.  | Part 7: Total other property not listed, line 54 +           | \$0.00      |                              |             |
| 62.  | Total personal property. Add lines 56 through 61             | \$17,550.00 | Copy personal property total | \$17,550.00 |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62 |             |                              | \$57,442.00 |

Official Form 106A/B Schedule A/B: Property page 6

|   |              | DOMINIC.          | 11 1 11 11 11 11 11 11 11 11 11 11 11 1 |                                      |
|---|--------------|-------------------|---|--------------------------------------|
| Fill in this infor                      |              |                   |   |                                      |
| Debtor 1                                | Jean M Jones |                   |   |                                      |
|   | First Name   | Middle Name       | Last Name                               |                                      |
| Debtor 2                                |              |                   |   |                                      |
| (Spouse if, filing)                     | First Name   | Middle Name       | Last Name                               |                                      |
| United States Bankruptcy Court for the: |              | NORTHERN DISTRICT | OF ILLINOIS                             |                                      |
| Case number (if known)                  |              |                   |   | Chook if this is an                  |
| (II KIIOWII)                            |              |                   |   | ☐ Check if this is an amended filing |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exer |
|---|
|---|

| 1. | Which set of exemption | s are vou claimin | a? Check one onl | v. even if vour st | oouse is filing with you. |
|----|------------------------|-------------------|------------------|--------------------|---------------------------|
|    |                        |                   |                  |                    |                           |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the Amount of the exemption you claim portion you own |  | Specific laws that allow exemption                              |  |  |
|--|--|---|--|--|
| Copy the value from<br>Schedule A/B                                    | Che                                      | eck only one box for each exemption.                            |  |  |
| \$39,892.00  |  | \$15,000.00   | 735 ILCS 5/12-901  |  |
|  |  | 100% of fair market value, up to any applicable statutory limit |  |  |
| \$13,100.00  |  | \$2,400.00  | 735 ILCS 5/12-1001(c)  |  |
|  |  | 100% of fair market value, up to any applicable statutory limit |  |  |
| \$2,788.00   |  | \$2,788.00  | 735 ILCS 5/12-1001(b)  |  |
|  |  | 100% of fair market value, up to any applicable statutory limit |  |  |
| \$1,000.00   |  | \$1,000.00  | 735 ILCS 5/12-1001(b)  |  |
|  |  | 100% of fair market value, up to any applicable statutory limit |  |  |
| \$50.00  |  | \$50.00   | 735 ILCS 5/12-1001(a)  |  |
|  |  | 100% of fair market value, up to any applicable statutory limit |  |  |
|  | \$39,892.00<br>\$13,100.00<br>\$1,000.00 | \$39,892.00   | \$39,892.00  \$15,000.00  100% of fair market value, up to any applicable statutory limit  \$2,788.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$1,000.00  \$2,788.00  \$2,788.00  \$2,788.00  \$39,892.00  \$40.0 |  |

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Case number (if known)

|    | Brief description of the property and line on Schedule A/B that lists this property   | Current value of the Amount of the exemption you claim portion you own |         | Specific laws that allow exemption                              |                       |
|----|---|--|---------|---|-----------------------|
|    |   | Copy the value from<br>Schedule A/B                                    | Che     |   |                       |
|    | Necessary Wearing Apparel<br>Line from Schedule A/B: 11.1                             | \$400.00   | •       | \$400.00  | 735 ILCS 5/12-1001(a) |
|    |   |  |         | 100% of fair market value, up to any applicable statutory limit |                       |
|    | Costume Jewelry Line from Schedule A/B: 12.1  | \$200.00   |         | \$200.00  | 735 ILCS 5/12-1001(b) |
|    |   |  |         | 100% of fair market value, up to any applicable statutory limit |                       |
|    | Cash Line from Schedule A/B: 16.1   | \$12.00  |         | \$12.00   | 735 ILCS 5/12-1001(b) |
|    | Ente from defletable PAB. 10.1  |  |         | 100% of fair market value, up to any applicable statutory limit |                       |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No |  |         | led on or after the date of adjustme                            | nt.)                  |
|    | Yes. Did you acquire the property cove  | red by the exemption w   | ithin 1 | ,215 days before you filed this case                            | ?                     |
|    | □ No<br>□ Yes   |  |         |   |                       |
|    |   |  |         |   |                       |

|                        |  | Document P   | age 18       | of 58                                  |                          |                   |
|------------------------|--|--|--------------|--|--------------------------|-------------------|
| Fill in this inform    | nation to identify you                 | ır case:   |              |  |                          |                   |
| Debtor 1               | Jean M Jones                           |  |              |  |                          |                   |
|                        | First Name                             | Middle Name La:  | st Name      |  |                          |                   |
| Debtor 2               |  |  |              |  |                          |                   |
| (Spouse if, filing)    | First Name                             | Middle Name La   | st Name      |  |                          |                   |
| United States Bar      | nkruptcy Court for the:                | NORTHERN DISTRICT OF ILLINO  | )IS          |  |                          |                   |
| •                      |  |  |              |  |                          |                   |
| Case number            |  |  |              |  | ☐ Check                  | if this is an     |
| ,                      |  |  |              |  | _                        | led filing        |
|                        |  |  |              |  | —                        | Ü                 |
| Official Form          | n 106D                                 |  |              |  |                          |                   |
| Schedule               | D: Creditors                           | Who Have Claims Se   | cured        | by Propert                             | V                        | 12/15             |
|                        |  |  |              |  | -                        |                   |
|                        |  | If two married people are filing together, b<br>out, number the entries, and attach it to th |              |  |                          |                   |
| number (if known).     | •                                      |  |              |  |                          |                   |
| 1. Do any creditors    | have claims secured by                 | your property?   |              |  |                          |                   |
| ☐ No. Check            | this box and submit the                | his form to the court with your other sch  | edules. Yo   | u have nothing else t                  | o report on this form.   |                   |
| Yes. Fill in           | all of the information                 | below.   |              |  |                          |                   |
| Part 1: List All       | I Secured Claims                       |  |              |  |                          |                   |
|                        |  | more than one secured claim, list the creditor   | senarately   | Column A                               | Column B                 | Column C          |
| for each claim. If mo  | ore than one creditor has              | a particular claim, list the other creditors in F  |              | Amount of claim                        | Value of collateral      | Unsecured         |
| much as possible, lis  | st the claims in alphabeti             | cal order according to the creditor's name.  |              | Do not deduct the value of collateral. | that supports this claim | portion<br>If any |
| 2.1 Cook Cou           | nty Treasurer                          | Describe the property that secures the c   | laim:        | \$3,700.66                             | \$39,892.00              | \$0.00            |
| Creditor's Name        | }                                      | 100 Park Ave. Unit 509 Calumet   | City,        | <u> </u>                               | <u> </u>                 |                   |
| 118 North              | Clark Street,                          | IL 60409 Cook County; PIN  |              |  |                          |                   |
| Suite 112              | •                                      | 29-24-100-018-1091   | l. =11.4b =4 |  |                          |                   |
| 29-24-100-             |  | As of the date you file, the claim is: Chec apply.   | k ali that   |  |                          |                   |
| Chicago, I             | L 60602                                | ☐ Contingent   |              |  |                          |                   |
| Number, Street,        | City, State & Zip Code                 | Unliquidated   |              |  |                          |                   |
| Who owes the del       | ht? Chaak ana                          | Disputed   |              |  |                          |                   |
| _                      | bt? Check one.                         | Nature of lien. Check all that apply.  | ~~~          | ara d                                  |                          |                   |
| Debtor 1 only          |  |  | gage or secu | irea                                   |                          |                   |
| Debtor 2 only          | h40                                    | ,  | :-!- !:>     |  |                          |                   |
| Debtor 1 and De        | eptor 2 only<br>ne debtors and another | ☐ Statutory lien (such as tax lien, mechan☐ Judgment lien from a lawsuit                     | ic's lien)   |  |                          |                   |
| Check if this cla      |  | _  | al estate    | taxes                                  |                          |                   |
| community del          |  | Other (including a right to onset)   |              |  |                          |                   |
| Date debt was incu     | urrad 2015                             | Last 4 digits of account number  |              |  |                          |                   |
| Date debt was incu     |  | Last 4 digits of account number  |              | <del></del>                            |                          |                   |
| 2.2 Cook Cou           | nty Traccurer                          | Describe the property that accuracy the  | Joims        | ¢4 507 04                              | ¢20.902.00               | \$0.00            |
| 2.2 Cook Cou           | nty Treasurer                          | 100 Park Ave. Unit 509 Calumet   |              | \$1,597.01                             | \$39,892.00              | \$0.00            |
|                        |  | IL 60409 Cook County; PIN  | City,        |  |                          |                   |
| 118 North<br>Suite 112 | Clark Street,                          | 29-24-100-018-1091   |              |  |                          |                   |
| 29-24-100-             | -018-1091                              | As of the date you file, the claim is: Chec  | k all that   |  |                          |                   |
| Chicago, I             |  | apply.  Contingent   |              |  |                          |                   |
| Number, Street,        | City, State & Zip Code                 | ☐ Unliquidated   |              |  |                          |                   |
|                        |  | ☐ Disputed   |              |  |                          |                   |
| Who owes the del       | bt? Check one.                         | Nature of lien. Check all that apply.  |              |  |                          |                   |
| Debtor 1 only          |  | ☐ An agreement you made (such as morte   | gage or secu | red                                    |                          |                   |
| Debtor 2 only          |  | car loan)  |              |  |                          |                   |
| Debtor 1 and De        | •                                      | ☐ Statutory lien (such as tax lien, mechan   | ic's lien)   |  |                          |                   |
|                        | ne debtors and another                 | Judgment lien from a lawsuit   | _1           | 4                                      |                          |                   |
| Check if this cla      |  | Other (including a right to offset)  | al estate    | taxes                                  |                          |                   |
| Johnnamy del           | <del></del>                            |  |              |  |                          |                   |
| Date debt was incu     | ırred 2016                             | Last 4 digits of account number  |              |  |                          |                   |

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| Debtor 1 Jean M Jones                                   |   | Case number (if know)    |             |  |  |
|---|---|--------------------------|-------------|--|--|
| First Name Middle N                                     | lame Last Name  |                          |             |  |  |
| 2.3 OverInd Bond  | Describe the property that secures the claim:                                     | \$15,745.23              | \$13,100.00 | \$2,645.23                                   |  |
| Creditor's Name   | 2016 Hyundai Elantra 47,000 miles<br>Value Per NADA                               |                          | <u> </u>    | <b>,</b> , , , , , , , , , , , , , , , , , , |  |
| 4701 W. Fullerton Ave.<br>Chicago, IL 60639             | As of the date you file, the claim is: Check all that apply.  Contingent          | _]<br>t                  |             |  |  |
| Number, Street, City, State & Zip Code                  | ☐ Unliquidated ☐ Disputed   |                          |             |  |  |
| Who owes the debt? Check one.                           | Nature of lien. Check all that apply.   |                          |             |  |  |
| ■ Debtor 1 only □ Debtor 2 only                         | ☐ An agreement you made (such as mortgage of car loan)                            | rsecured                 |             |  |  |
| ☐ Debtor 1 and Debtor 2 only                            | ☐ Statutory lien (such as tax lien, mechanic's lier                               | n)                       |             |  |  |
| lacksquare At least one of the debtors and another      | ☐ Judgment lien from a lawsuit  |                          |             |  |  |
| ☐ Check if this claim relates to a community debt       | Other (including a right to offset) Purchas                                       | se Money Security Intere | est         |  |  |
| Opened<br>4/20/17                                       |   |                          |             |  |  |
| Date debt was incurred 8/26/17                          | Last 4 digits of account number 818   | 39                       |             |  |  |
| 2.4 Park of River Oaks 1A                               | Describe the property that secures the claim:                                     | \$6,754.28               | \$39,892.00 | \$0.00                                       |  |
| Creditor's Name   | 100 Park Ave. Unit 509 Calumet City, IL 60409 Cook County; PIN 29-24-100-018-1091 | ,                        |             |  |  |
| PO Box 4653   | As of the date you file, the claim is: Check all that apply.                      | Ī.                       |             |  |  |
| Hinsdale, IL 60522                                      | Contingent  |                          |             |  |  |
| Number, Street, City, State & Zip Code                  | ☐ Unliquidated ☐ Disputed   |                          |             |  |  |
| Who owes the debt? Check one.                           | Nature of lien. Check all that apply.   |                          |             |  |  |
| ■ Debtor 1 only □ Debtor 2 only                         | An agreement you made (such as mortgage or car loan)                              | r secured                |             |  |  |
| Debtor 1 and Debtor 2 only                              | Statutory lien (such as tax lien, mechanic's lier                                 | n)                       |             |  |  |
| At least one of the debtors and another                 | ☐ Judgment lien from a lawsuit  |                          |             |  |  |
| ☐ Check if this claim relates to a community debt       | Other (including a right to offset)   | Assessments              |             |  |  |
| Date debt was incurred                                  | Last 4 digits of account number   |                          |             |  |  |
| 2.5 Park of River Oaks Homeowners Assoc Creditor's Name | Describe the property that secures the claim:                                     | \$3,195.74               | \$39,892.00 | \$0.00                                       |  |
| c/o Kovitz Shifrin Nesbit                               | 100 Park Ave. Unit 509 Calumet City, IL 60409 Cook County; PIN 29-24-100-018-1091 |                          |             |  |  |
| 175 N. Archer Ave.                                      | As of the date you file, the claim is: Check all that apply.                      | i e                      |             |  |  |
| Mundelein, IL 60060                                     | Contingent  |                          |             |  |  |
| Number, Street, City, State & Zip Code                  | ☐ Unliquidated ☐ Disputed   |                          |             |  |  |
| Who owes the debt? Check one.                           | Nature of lien. Check all that apply.   |                          |             |  |  |
| ■ Debtor 1 only □ Debtor 2 only                         | ☐ An agreement you made (such as mortgage of car loan)                            | r secured                |             |  |  |
| ☐ Debtor 1 and Debtor 2 only                            | ☐ Statutory lien (such as tax lien, mechanic's lien                               | n)                       |             |  |  |
| ☐ At least one of the debtors and another               | ☐ Judgment lien from a lawsuit  |                          |             |  |  |
| ☐ Check if this claim relates to a community debt       | Other (including a right to offset)   | Assessments              |             |  |  |
| Date debt was incurred                                  | Last 4 digits of account number   |                          |             |  |  |

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debto                         | or 1 Jean M Jones  |           | Case number (if know)  |  |  |  |  |
|-------------------------------|--|-----------|--|--|--|--|--|
|                               | First Name Middle Name   | Last Name |  |  |  |  |  |
| Part 2 Use the trying than of | Add the dollar value of your entries in Column A on this page. Write that number here:  If this is the last page of your form, add the dollar value totals from all pages.  Write that number here:  \$30,992.92  \$30,992.92  Part 2: List Others to Be Notified for a Debt That You Already Listed  Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. |           |  |  |  |  |  |
|                               | Name, Number, Street, City, State & Zip Code<br>Belmont Realty Corp<br>5341 W. Belmont Ave<br>29-24-100-018-1091<br>Chicago, IL 60641  |           | which line in Part 1 did you enter the creditor?                             |  |  |  |  |
|                               | Name, Number, Street, City, State & Zip Code<br>Cook County Clerk's Office<br>118 N. Clark St., Room 434<br>29-24-100-018-1091<br>Chicago, IL 60602  |           | which line in Part 1 did you enter the creditor?  4 digits of account number |  |  |  |  |
|                               | Name, Number, Street, City, State & Zip Code<br>Kovitz, Shifrin & Nesbit<br>750 Lake Cook Road, Suite 350<br>2017 M6 004535<br>Buffalo Grove, IL 60089   |           | which line in Part 1 did you enter the creditor? <b>2.4</b>                  |  |  |  |  |
|                               | Name, Number, Street, City, State & Zip Code<br>Kovitz, Shifrin & Nesbit<br>170 N. Archer<br>2017 M6 004535<br>Mundelein, IL 60060   |           | which line in Part 1 did you enter the creditor?                             |  |  |  |  |
|                               | Name, Number, Street, City, State & Zip Code Parks River Oaks HOA Advanced Property Specialist PO Box 7704   |           | which line in Part 1 did you enter the creditor?4 digits of account number   |  |  |  |  |

Carol Stream, IL 60197-7704

|   |  | Document  | Page 21 of   | <u>58</u>  |   |                                  |
|---|--|---|--|--|---|----------------------------------|
| Fill in this in                                   | nformation to identify your c  | ase:  |  |  |   |                                  |
| Debtor 1  | Jean M Jones   |   |  |  |   |                                  |
|   | First Name   | Middle Name   | Last Name  |  |   |                                  |
| Debtor 2  |  |   |  |  |   |                                  |
| (Spouse if, filing)                               | First Name   | Middle Name   | Last Name  |  |   |                                  |
| United States                                     | s Bankruptcy Court for the:  | NORTHERN DISTRICT OF  | ILLINOIS   |  |   |                                  |
| Case numbe  | ır   |   |  |  |   |                                  |
| (if known)  |  |   |  |  | ☐ Check                                       | if this is an                    |
|   |  |   |  |  | amend   | ed filing                        |
| )#:a:a!   | 0 mm 100F/F  |   |  |  |   |                                  |
|   | orm 106E/F   | ha Hawa Huanasina   | d Claima   |  |   | 40/4E                            |
|   | e E/F: Creditors Will<br>e and accurate as possible. Use   |   |  |  |   | 12/15                            |
| schedule G: E<br>schedule D: C<br>eft. Attach the | contracts or unexpired leases t<br>xecutory Contracts and Unexpir<br>reditors Who Have Claims Secu<br>c Continuation Page to this page<br>a number (if known). | red Leases (Official Form 106G)<br>ired by Property. If more space i      | . Do not include any cre<br>is needed, copy the Par      | editors with partially s<br>t you need, fill it out, | ecured claims that a<br>number the entries ir | re listed in<br>the boxes on the |
|   | st All of Your PRIORITY Uns  | secured Claims  |  |  |   |                                  |
|   | editors have priority unsecured  |   |  |  |   |                                  |
| ☐ No. Go  | • •  | <b>,</b>  |  |  |   |                                  |
| Yes.  |  |   |  |  |   |                                  |
| identify wh<br>possible, I                        | your priority unsecured claims, nat type of claim it is. If a claim has ist the claims in alphabetical order nore than one creditor holds a par                | s both priority and nonpriority amor<br>according to the creditor's name. | unts, list that claim here a<br>If you have more than tv | and show both priority a                             | nd nonpriority amount                         | s. As much as                    |
| (For an ex  | planation of each type of claim, se  | ee the instructions for this form in t                                    | the instruction booklet.)                                |  |   |                                  |
|   |  |   |  | Total claim  | Priority amount                               | Nonpriority amount               |
|   | ois Department of Reven  | ue Last 4 digits of acco  | ount number  | \$208.00   | \$208.00                                      | \$0.00                           |
|   | ty Creditor's Name   | When was the debt   | in accorded 2  |  |   |                                  |
|   | kruptcy Section<br>Box 64338   | when was the dept   | incurred?  |  | -   |                                  |
| _   | cago, IL 60664-0338  |   |  |  |   |                                  |
|   | ber Street City State Zlp Code   | As of the date you f  | ile, the claim is: Check                                 | all that apply                                       |   |                                  |
| _   | curred the debt? Check one.  | ☐ Contingent  |  |  |   |                                  |
| Debte   | or 1 only  | ☐ Unliquidated  |  |  |   |                                  |
| ☐ Debto   | or 2 only  | ☐ Disputed  |  |  |   |                                  |
| ☐ Debto   | or 1 and Debtor 2 only   | Type of PRIORITY u  | ınsecured claim:   |  |   |                                  |
| ☐ At lea  | ast one of the debtors and another   | Domestic support  | tobligations   |  |   |                                  |
| ☐ Chec  | ck if this claim is for a communi  | ity debt Taxes and certain  | o other debts you owe the                                | e government   |   |                                  |
| Is the cla  | aim subject to offset?   | _   | or personal injury while y                               |  |   |                                  |
| ■ No  |  | ☐ Other. Specify _  |  |  |   |                                  |
| ☐ Yes   |  | · , -   | State Income Taxe  | s  |   |                                  |

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| Dept    | or 1 Jean W Jones  | Case number (if know)  |                   |          |
|---------|--|--|-------------------|----------|
| 2.2     | IRS  | Last 4 digits of account number \$478.28 \$4   | 66.76             | \$11.52  |
|         | Priority Creditor's Name c/o Centralized Insolvency Operatio | When was the debt incurred?  |                   | •        |
|         | P.O.Box 21126<br>Philadelphia, PA 19114                      |  |                   |          |
|         | Number Street City State Zlp Code                            | As of the date you file, the claim is: Check all that apply  |                   |          |
|         | Who incurred the debt? Check one.                            | ☐ Contingent   |                   |          |
|         | ■ Debtor 1 only  | ☐ Unliquidated   |                   |          |
|         | ☐ Debtor 2 only  | ☐ Disputed   |                   |          |
|         | ☐ Debtor 1 and Debtor 2 only                                 | Type of PRIORITY unsecured claim:  |                   |          |
|         | ☐ At least one of the debtors and another                    | ☐ Domestic support obligations   |                   |          |
|         | ☐ Check if this claim is for a community debt                | Taxes and certain other debts you owe the government   |                   |          |
|         | Is the claim subject to offset?                              | ☐ Claims for death or personal injury while you were intoxicated   |                   |          |
|         | ■ No   | ☐ Other. Specify   |                   |          |
|         | Yes  | Federal Income Taxes   |                   |          |
| Part    | 2: List All of Your NONPRIORITY Unsecu                       | ured Claims  |                   |          |
| 3. D    | o any creditors have nonpriority unsecured claim             | ns against you?  |                   |          |
| _       | ☐ No. You have nothing to report in this part. Submit        |  |                   |          |
|         |  | and only to the seas han your only observation.  |                   |          |
|         | Yes.   |  |                   |          |
| u<br>th | nsecured claim, list the creditor separately for each c      | e alphabetical order of the creditor who holds each claim. If a creditor has more th<br>laim. For each claim listed, identify what type of claim it is. Do not list claims already in<br>creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the | cluded in Part 1. | If more  |
| ·       | u  |  | Total claim       |          |
| 4.1     | Aaron's Furniture  | Last 4 digits of account number  |                   | \$0.00   |
|         | Nonpriority Creditor's Name                                  |  |                   | <u> </u> |
|         | 3359 Chicago Rd.<br>Chicago Heights, IL 60412                | When was the debt incurred?  | _                 |          |
|         | Number Street City State Zlp Code                            | As of the date you file, the claim is: Check all that apply  |                   |          |
|         | Who incurred the debt? Check one.                            |  |                   |          |
|         | Debtor 1 only  | ☐ Contingent   |                   |          |
|         | Debtor 2 only  | ☐ Unliquidated   |                   |          |
|         | ☐ Debtor 1 and Debtor 2 only                                 | ☐ Disputed   |                   |          |
|         | $\square$ At least one of the debtors and another            | Type of NONPRIORITY unsecured claim:   |                   |          |
|         | ☐ Check if this claim is for a community                     | ☐ Student loans  |                   |          |
|         | debt Is the claim subject to offset?                         | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |                   |          |
|         | No   | □ Debts to pension or profit-sharing plans, and other similar debts  |                   |          |
|         |  |  |                   |          |
|         | ☐ Yes  | Other. Specify Notice Only   |                   |          |

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Case number (if know) Debtor 1 Jean M Jones 4.2 \$1,093.57 **Americash Loans** Last 4 digits of account number Nonpriority Creditor's Name 880 Lee Street When was the debt incurred? Suite 302 Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Payday Loan ☐ Yes 4.3 Comcast Last 4 digits of account number \$400.00 Nonpriority Creditor's Name 1255 W. North Ave. When was the debt incurred? Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utility ☐ Yes 4.4 ComEd Last 4 digits of account number \$3,644.89 Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Attn: Bkcy Group-Claims **Department** Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utilities

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Debtor 1 Jean M Jones Case number (if know) 4.5 \$246.00 Convergent Outsoucing, Inc Last 4 digits of account number 1565 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? **Opened 02/17** Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Comcast ☐ Yes 4.6 Credit Management, LP Last 4 digits of account number 8220 \$1,398.00 Nonpriority Creditor's Name The Offices of Credit Management, When was the debt incurred? **Opened 09/11** LP Po Box 118288 Carrolton, TX 75011 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Wide Open West ☐ Yes Other. Specify Settlement 4.7 Healthcare Assoc Cr Un Last 4 digits of account number 0625 \$750.00 Nonpriority Creditor's Name Opened 08/17 Last Active 1151 E Warrenville Rd When was the debt incurred? 9/01/17 Naperville, IL 60563 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Secured

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Case number (if know)

| Debto | or 1 Jean M Jones                                       |                                     | Case number (if know)                         |          |
|-------|---|-------------------------------------|---|----------|
| 4.8   | Herman Houston  | Last 4 digits of account number     |   | \$0.00   |
|       | Nonpriority Creditor's Name                             |                                     |   | φοιου    |
|       | 13314 S. Eberhart                                       | When was the debt incurred?         |   |          |
|       | Riverdale, IL 60827                                     |                                     |   |          |
|       | Number Street City State Zlp Code                       | As of the date you file, the claim  | is: Check all that apply                      |          |
|       | Who incurred the debt? Check one.                       |                                     |   |          |
|       | ■ Debtor 1 only   | ☐ Contingent                        |   |          |
|       | Debtor 2 only   | ☐ Unliquidated                      |   |          |
|       | Debtor 1 and Debtor 2 only                              | ☐ Disputed                          |   |          |
|       | ☐ At least one of the debtors and another               | Type of NONPRIORITY unsecure        | d claim:                                      |          |
|       | ☐ Check if this claim is for a community                | ☐ Student loans                     |   |          |
|       | debt  | Obligations arising out of a sens   | ration agreement or divorce that you did not  |          |
|       | Is the claim subject to offset?                         | report as priority claims           | mation agreement of divorce that you did not  |          |
|       | ■ No  | Debts to pension or profit-sharing  | g plans, and other similar debts              |          |
|       | Yes   | Other. Specify Notice Only          | <u>/</u>                                      |          |
| 4.9   | Med Business Bureau                                     | Last 4 digits of account number     | 5142  | \$116.00 |
|       | Nonpriority Creditor's Name 1460 Renaissance Dr #400    | When was the debt incurred?         | Opened 4/10/13                                |          |
|       | Park Ridge, IL 60068  Number Street City State Zlp Code | As of the date you file, the claim  | is: Check all that apply                      |          |
|       | Who incurred the debt? Check one.                       | As of the date you me, the claim    | is. Offect all that apply                     |          |
|       | _   |                                     |   |          |
|       | Debtor 1 only   | Contingent                          |   |          |
|       | Debtor 2 only   | ☐ Unliquidated                      |   |          |
|       | Debtor 1 and Debtor 2 only                              | ☐ Disputed                          |   |          |
|       | ☐ At least one of the debtors and another               | Type of NONPRIORITY unsecure        | d claim:                                      |          |
|       | ☐ Check if this claim is for a community                | ☐ Student loans                     |   |          |
|       | debt  | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not  |          |
|       | Is the claim subject to offset?                         | report as priority claims           | ,   |          |
|       | ■ No  | Debts to pension or profit-sharing  | g plans, and other similar debts              |          |
|       | Yes   | Other. Specify Unimed Ltd           | d Metrosouth                                  |          |
| 4.1   | Roy Chew c/o Michael Maksimovich                        | Look 4 digito of account number     |   | \$0.00   |
| 0     | Nonpriority Creditor's Name                             | Last 4 digits of account number     |   | Ψ0.00    |
|       | 8643 W. Ogden   | When was the debt incurred?         |   |          |
|       | Lyons, IL 60534   |                                     | ·   |          |
|       | Number Street City State Zlp Code                       | As of the date you file, the claim  | is: Check all that apply                      |          |
|       | Who incurred the debt? Check one.                       |                                     |   |          |
|       | Debtor 1 only   | ☐ Contingent                        |   |          |
|       | Debtor 2 only   | ☐ Unliquidated                      |   |          |
|       | ☐ Debtor 1 and Debtor 2 only                            | ☐ Disputed                          |   |          |
|       | ☐ At least one of the debtors and another               | Type of NONPRIORITY unsecure        | d claim:                                      |          |
|       | ☐ Check if this claim is for a community                | ☐ Student loans                     |   |          |
|       | debt  | Obligations arising out of a sens   | aration agreement or divorce that you did not |          |
|       | Is the claim subject to offset?                         | report as priority claims           | adion agreement of divorce that you did not   |          |
|       | ■ No  | Debts to pension or profit-sharir   | ng plans, and other similar debts             |          |
|       | ☐ Yes   | Other Specify Notice Only           |   |          |
|       | - 100   | - Umer Specify House Offi           |   |          |

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|                 | Case 10-00039 DOC 1  |   |   | , IVIAIII            |
|-----------------|--|---|---|----------------------|
| Debtor 1        | Jean M Jones   | Document Page                             | 26 of 58<br>Case number (if know)   |                      |
| 4.1             | Seventh Avenue   | Last 4 digits of account number           | er 9570   | \$531.00             |
|                 | Nonpriority Creditor's Name  |   |   | ·                    |
|                 | Seventh Avenue, Inc  |   | Opened 01/12 Last Active  |                      |
|                 | 1112 7th Ave   | When was the debt incurred?               | 9/15/13   |                      |
|                 | Monroe, WI 53566   | As of the data was file the elec-         | en in Obselvallahet anab.   |                      |
|                 | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the clai         | <b>m is:</b> Спеск ан that apply  |                      |
|                 | Debtor 1 only  |   |   |                      |
|                 | _  | ☐ Contingent                              |   |                      |
|                 | Debtor 2 only  | ☐ Unliquidated                            |   |                      |
|                 | Debtor 1 and Debtor 2 only   | ☐ Disputed  Type of NONPRIORITY unsecu    | red claim:  |                      |
|                 | At least one of the debtors and another                              | ☐ Student loans                           | reu Ciaiii.   |                      |
|                 | ☐ Check if this claim is for a community debt                        | _   | eparation agreement or divorce that you did not   |                      |
|                 | Is the claim subject to offset?                                      | report as priority claims                 | sparation agreement or divorce that you did not   |                      |
|                 | ■ No   | ☐ Debts to pension or profit-sha          | ring plans, and other similar debts   |                      |
|                 | □Yes   | ■ Other. Specify Charge A                 | ccount  |                      |
|                 | <b>—</b> 163   | Other. Specify                            |   |                      |
| Dort 2.         | List Others to Be Natified About a D                                 | acht That Var. Already Listed             |   |                      |
| Part 3:         | List Others to Be Notified About a D                                 | -   |   |                      |
|                 |  |   | It you already listed in Parts 1 or 2. For example in Parts 1 or 2, then list the collection agency h |                      |
|                 |  |   | Iditional creditors here. If you do not have addit  |                      |
| notifie         | d for any debts in Parts 1 or 2, do not fill out                     | t or submit this page.                    |   |                      |
|                 | d Address  | On which entry in Part 1 or Part 2 did y  |   |                      |
|                 | s Furniture<br>rrence Avenue   | Line 4.1 of (Check one):                  | Part 1: Creditors with Priority Unsecured Claim   |                      |
|                 | et City, IL 60409  |   | Part 2: Creditors with Nonpriority Unsecured Cl   | aims                 |
| <b>J</b> aiaiii | or only, 12 ou los   | Last 4 digits of account number           |   |                      |
| Name an         | nd Address   | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?  |                      |
|                 | cash Loans   | Line <b>4.2</b> of (Check one):           | ☐ Part 1: Creditors with Priority Unsecured Claim:  | S                    |
| PO Bo           | x 184  |   | ■ Part 2: Creditors with Nonpriority Unsecured Cl   |                      |
| Des Pl          | aines, IL 60016  |   | — Fart 2. Orealions with Horiphority offsecured of  | anno                 |
|                 |  | Last 4 digits of account number           |   |                      |
|                 | d Address  | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?  |                      |
|                 | Attorney General   | Line 2.1 of (Check one):                  | ■ Part 1: Creditors with Priority Unsecured Claim   | s                    |
| 9th Flo         | Randolph Street  |   | ☐ Part 2: Creditors with Nonpriority Unsecured Cl   | aims                 |
|                 | jo, IL 60601   |   |   |                      |
|                 | , ,  | Last 4 digits of account number           |   |                      |
| Name an         | nd Address   | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?  |                      |
|                 | Department of Revenue  | Line <b>2.1</b> of ( <i>Check one</i> ):  | ■ Part 1: Creditors with Priority Unsecured Claim   | s                    |
|                 | ox 19006   |   | ☐ Part 2: Creditors with Nonpriority Unsecured Cl   |                      |
| Spring          | field, IL 62794  | Lock 4 digits of appoint number           |   |                      |
|                 |  | Last 4 digits of account number           |   |                      |
|                 | d Address  | On which entry in Part 1 or Part 2 did y  | ou list the original creditor?  |                      |
|                 | al Revenue Serivce   | Line 2.2 of (Check one):                  | ■ Part 1: Creditors with Priority Unsecured Claim   | s                    |
|                 | ox 7346<br>elphia, PA 19101-7346                                     |   | ☐ Part 2: Creditors with Nonpriority Unsecured Cl   | aims                 |
| rillau          | eipilia, FA 19101-7340   | Last 4 digits of account number           |   |                      |
|                 |  |   |   |                      |
| Part 4:         | Add the Amounts for Each Type of                                     | Unsecured Claim                           |   |                      |
|                 | he amounts of certain types of unsecured c<br>f unsecured claim.     | laims. This information is for statistica | ıl reporting purposes only. 28 U.S.C. §159. Add t   | the amounts for each |
| .,,             |  |   | Total Claim   |                      |
|                 |  |   |   |                      |

|              |     |   |     |    | l otal Claim |
|--------------|-----|---|-----|----|--------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00         |
| Total claims |     |   |     | -  |              |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government                    | 6b. | \$ | 686.28       |
|              | 6c. | Claims for death or personal injury while you were intoxicated          | 6c. | \$ | 0.00         |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00         |

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Debtor 1 Jean M Jones

|                 | 6e.               | Total Priority. Add lines 6a through 6d.   | 6e.               | \$             | 686.28                   |
|-----------------|-------------------|--|-------------------|----------------|--------------------------|
| Total<br>claims | 6f.               | Student loans  | 6f.               | \$             | Total Claim 0.00         |
| from Part 2     | 6g.<br>6h.<br>6i. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount here. | 6g.<br>6h.<br>6i. | \$<br>\$<br>\$ | 0.00<br>0.00<br>8,179.46 |
|                 | 6j.               | Total Nonpriority. Add lines 6f through 6i.  | 6j.               | \$             | 8,179.46                 |

| Fill in this infor     | mation to identify your  | case:             |             |  |
|------------------------|--------------------------|-------------------|-------------|--|
| Debtor 1               | Jean M Jones             |                   |             |  |
|                        | First Name               | Middle Name       | Last Name   |  |
| Debtor 2               |                          |                   |             |  |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name   |  |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number (if known) |                          |                   |             |  |
|                        |                          |                   |             |  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Ricky Pert
100 Park Ave, Unit 509
Calumet City, IL 60409

State what the contract or lease is for
Debtor is Lessor on a Residential Apartment Lease:
\$600.00 per month.

|                                  |   | Docume   | ent Page 29 d           | <u>) 1 58                                   </u>    |   |
|----------------------------------|---|--|-------------------------|---|---|
| Fill in this in                  | formation to identify your                          | case:  |                         |   |   |
| Debtor 1                         | Jean M Jones  |  |                         |   |   |
|                                  | First Name  | Middle Name  | Last Name               |   |   |
| Debtor 2<br>(Spouse if, filing)  | First Name  | Middle Name  | Last Name               |   |   |
| (Spouse II, IIIIIIg)             | First Name  |  |                         |   |   |
| United States                    | s Bankruptcy Court for the:                         | NORTHERN DISTRICT                                      | OF ILLINOIS             |   |   |
| Case numbe<br>(if known)         | r   |  |                         |   | ☐ Check if this is an   |
|                                  |   |  |                         |   | amended filing  |
| Official I                       | Form 100LL  |  |                         |   |   |
|                                  | Form 106H   |  |                         |   |   |
| Schedu                           | ile H: Your Cod                                     | ebtors   |                         |   | 12/15   |
| 1. Do yo                         | nd case number (if known                            | ). Answer every question                               |                         |   | of any Additional Pages, write  |
| ☐ Yes                            |   |  |                         |   |   |
| Arizona,  No. G                  | California, Idaho, Louisiana o to line 3.           | , Nevada, New Mexico, Pu                               | erto Rico, Texas, Wash  |   | states and territories include  |
| ☐ Yes. [                         | Did your spouse, former spo                         | use, or legal equivalent live                          | e with you at the time? |   |   |
| in line 2<br>Form 10<br>out Colu | again as a codebtor only 6D), Schedule E/F (Officia | if that person is a guaran<br>I Form 106E/F), or Sched | tor or cosigner. Make   | sure you have listed the<br>16G). Use Schedule D, S | with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt |
| 7101                             | no, nambon, oneon, only, orate and E                | 0000   |                         | Check all Schedules                                 | ь шасарріу.   |
| 3.1                              |   |  |                         | _ Schedule D, line                                  |   |
| Na                               | me  |  |                         | ☐ Schedule E/F, lir                                 |   |
|                                  |   |  |                         | ☐ Schedule G, line                                  | ·   |
| Nui<br>City                      | mber Street<br>y                                    | State  | ZIP Code                | _   |   |
|                                  |   |  |                         | Ostrodo D. Pos                                      |   |
| 3.2 Na                           | me  |  |                         | _ ☐ Schedule D, line ☐ Schedule E/F, line           |   |
|                                  |   |  |                         | ☐ Schedule E/F, III                                 |   |
| **                               | mhau Cii  |  |                         |   | · <u></u>   |
| Nui<br>Cit <u>y</u>              | mber Street<br>y                                    | State  | ZIP Code                |   |   |
|                                  |   |  |                         |   |   |

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| Fill        | in this information to identify your  | case:  |   |            |      |             |                         |                          |                              |          |
|-------------|---|--|---|------------|------|-------------|-------------------------|--------------------------|------------------------------|----------|
| Del         | btor 1 Jean M Jon   | es   |   |            | _    |             |                         |                          |                              |          |
|             | btor 2  |  |   |            |      |             |                         |                          |                              |          |
| Uni         | ited States Bankruptcy Court for the  | e: NORTHERN DISTRIC                                    | CT OF ILLINOIS                                      |            | _    |             |                         |                          |                              |          |
|             | se number<br>nown)  |  |   |            |      |             |                         | ed filing<br>ent showin  | g postpetition               |          |
| 0           | fficial Form 106I   |  |   |            |      | Ī           | /M / DD/ \              | YYYY                     |                              |          |
| S           | chedule I: Your Inc   | ome  |   |            |      |             |                         |                          |                              | 12/1     |
| spo<br>atta | plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.  Tt 1: Describe Employment  Fill in your employment | ur spouse is not filing wi<br>On the top of any additi | ith you, do not inclu<br>onal pages, write yo       | ıde infor  | mati | on abou     | t your spo<br>umber (if | ouse. If me<br>known). A | ore space is<br>Answer every | needed,  |
|             | information.  |  | Debtor 1  |            |      |             | _                       |                          | iling spouse                 |          |
|             | If you have more than one job, attach a separate page with information about additional   | Employment status                                      | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |            |      |             | ☐ Empl                  | employed                 |                              |          |
|             | employers.  | Occupation   | <b>Certified Nurse</b>                              | Assista    | ant  |             |                         |                          |                              |          |
|             | Include part-time, seasonal, or self-employed work.   | Employer's name  | St. Bernard Hos                                     | spital     |      |             |                         |                          |                              |          |
|             | Occupation may include student or homemaker, if it applies.   | Employer's address                                     | 326 W. 64th Str<br>Chicago, IL 606                  |            |      |             |                         |                          |                              |          |
|             |   | How long employed to                                   | here? 4 Years                                       | S          |      |             | _                       |                          |                              |          |
| Pai         | Give Details About Mo   | onthly Income  |   |            |      |             |                         |                          |                              |          |
|             | imate monthly income as of the ouse unless you are separated.   | date you file this form. If                            | you have nothing to r                               | eport for  | any  | line, write | e \$0 in the            | e space. Ind             | clude your no                | n-filing |
|             | ou or your non-filing spouse have me space, attach a separate sheet to  |  | ombine the information                              | on for all | empl | oyers for   | that perso              | on on the li             | nes below. If                | you need |
|             |   |  |   |            |      | For De      | btor 1                  |                          | btor 2 or<br>ing spouse      |          |
| 2.          | List monthly gross wages, sale deductions). If not paid monthly,  |  |   | 2.         | \$   | 1           | ,999.00                 | \$                       | N/A                          | -        |
| 3.          | Estimate and list monthly over  | time pay.  |   | 3.         | +\$  |             | 0.00                    | +\$                      | N/A                          | -        |
| 4.          | Calculate gross Income. Add I   | ine 2 + line 3.  |   | 4.         | \$   | 1,9         | 99.00                   | \$                       | N/A                          |          |

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| Deb | tor 1                 | Jean M Jones  | -       | (   | Case            | number (if kno | wn)  |       |                       |            |                |
|-----|-----------------------|---|---------|-----|-----------------|----------------|------|-------|-----------------------|------------|----------------|
|     |                       |   |         |     | Foi             | r Debtor 1     |      |       | Debtor 2<br>filing sp |            |                |
|     | Cop                   | y line 4 here   | 4.      |     | \$_             | 1,999.         | 00   | \$    |                       | N/A        |                |
| 5.  | List                  | all payroll deductions:   |         |     |                 |                |      |       |                       |            |                |
|     | 5a.                   | Tax, Medicare, and Social Security deductions   | 5       | a.  | \$              | 269.           | 00   | \$    |                       | N/A        |                |
|     | 5b.                   | Mandatory contributions for retirement plans  | 51      | b.  | \$              | 0.             | 00   | \$    |                       | N/A        |                |
|     | 5c.                   | Voluntary contributions for retirement plans  | 50      | C.  | \$_             | 0.             | 00   | \$    |                       | N/A        |                |
|     | 5d.                   | Required repayments of retirement fund loans  | 50      | d.  | \$_             | 0.             | 00   | \$    |                       | N/A        |                |
|     | 5e.                   | Insurance   |         | e.  | \$_             | 123.           |      | \$    |                       | N/A        |                |
|     | 5f.                   | Domestic support obligations  | 5f      |     | \$_             |                | 00   | \$    |                       | N/A        |                |
|     | 5g.                   | Union dues  | 50      |     | \$_             |                | 00   |       |                       | N/A        |                |
|     | 5h.                   | Other deductions. Specify: LBT Insurance  | _ bi    | h.+ | \$<br>•         |                |      | + \$_ |                       | N/A        |                |
|     |                       | Short-Term Disability Uniform   | _       |     | \$_<br>\$       | 28.<br>85.     |      | \$    |                       | N/A<br>N/A |                |
| 6   | مام ۸                 |   |         |     | Ψ_<br>\$        |                |      | · —   |                       |            |                |
| 6.  |                       | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.      |     | Ť –             | 555.           |      | \$    |                       | N/A        |                |
| 7.  |                       | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.      | •   | \$ <sub>_</sub> | 1,444.         | 00   | \$    |                       | N/A        |                |
| 8.  | List<br>8a.           | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 88      | a.  | \$              | 600.           | 00   | \$    |                       | N/A        |                |
|     | 8b.                   | Interest and dividends  | 81      |     | \$ <sup>-</sup> |                | 00   | \$-   |                       | N/A        |                |
|     | 8c.                   | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 80      | c.  | \$              |                | 00   | \$    |                       | N/A        |                |
|     | 8d.                   | Unemployment compensation   | 80      | d.  | \$              |                | 00   | \$    |                       | N/A        |                |
|     | 8e.                   | Social Security   | 86      | e.  | \$              | 0.             | 00   | \$    |                       | N/A        |                |
|     | 8f.                   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:         | e<br>8f | f.  | \$              | 0.             | 00   | \$    |                       | N/A        |                |
|     | 8g.                   | Pension or retirement income  | _<br>8  | g.  | \$              | 0.             | 00   | \$    |                       | N/A        |                |
|     | 8h.                   | Other monthly income. Specify:  | _ 81    | h.+ | \$_             | 0.             | 00   | + \$  |                       | N/A        |                |
| 9.  | Add                   | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.      | . [ | \$              | 600.           | 00   | \$    |                       | N/A        |                |
| 10  | Cal                   | culate monthly income. Add line 7 + line 9.   | 10.     | \$  |                 | 2,044.00       | + \$ |       | N/A =                 | = \$       | 2,044.00       |
|     |                       | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |         | _   |                 | 2,044.00       | -    |       | 107                   | -          | 2,011.00       |
| 11. | Inclu<br>othe<br>Do r | te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:     | dep     |     |                 |                |      | ,     | chedule<br>11.        |            | 0.00           |
| 12. |                       | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies   |         |     |                 |                |      |       | 12.                   | \$Combin   | 2,044.00<br>ed |
| 13. |                       | you expect an increase or decrease within the year after you file this form.  No.   | ?       |     |                 |                |      |       | ı                     | monthly    | income         |
|     |                       | Yes. Explain:   |         |     |                 |                |      |       |                       |            |                |

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|                                    |   |   |  |   | •               |                   |   |
|------------------------------------|---|---|--|---|-----------------|-------------------|---|
| Fill in this                       | information to identify yo  | our case:                                   |  |   |                 |                   |   |
| Debtor 1                           | Jean M Jone   | s   |  |   | Check           | c if this is:     |   |
| Debtor 2                           |   |   |  |   | _               | An amended filing | ving postpetition chapter                         |
| (Spouse, if                        | filing)   |   |  |   |                 |                   | the following date:                               |
| United Stat                        | es Bankruptcy Court for the   | NORTHER                                     | RN DISTRICT OF ILLING                          | OIS                                     | <u> </u>        | MM / DD / YYYY    |   |
| Case numb                          | ner   |   |  |   |                 |                   |   |
| (If known)                         |   |   |  |   |                 |                   |   |
| Officia                            | al Form 106J  |   |  |   | •               |                   |   |
|                                    | dule J: Your  | Expens                                      | 293  |   |                 |                   | 12/1  |
| Be as cor<br>informati<br>number ( | mplete and accurate as<br>on. If more space is ne<br>if known). Answer ever | possible. If<br>eded, attach<br>y question. | two married people ar                          |   |                 |                   |   |
| Part 1:                            | Describe Your House is a joint case?  | hold  |  |   |                 |                   |   |
|                                    | o. Go to line 2.  |   |  |   |                 |                   |   |
|                                    | es. Does Debtor 2 live i  | n a separate                                | household?                                     |   |                 |                   |   |
|                                    | □ No  |   |  |   |                 |                   |   |
|                                    | ☐ Yes. Debtor 2 mus   | st file Official I                          | Form 106J-2, <i>Expenses</i>                   | for Separate House                      | ehold of Debto  | or 2.             |   |
| 2. <b>Do</b> y                     | ou have dependents?   | ■ No  |  |   |                 |                   |   |
| Do n<br>Debt                       | ot list Debtor 1 and or 2.  |   | ill out this information for ach dependent     | Dependent's relati<br>Debtor 1 or Debto |                 | Dependent's age   | Does dependent live with you?                     |
|                                    | ot state the  |   |  |   |                 |                   | □ No  |
| depe                               | endents names.  |   |  |   |                 |                   | ☐ Yes   |
|                                    |   |   |  |   |                 |                   | □ No<br>□ Yes                                     |
|                                    |   |   |  |   |                 |                   | □ No  |
|                                    |   |   |  |   |                 |                   | ☐ Yes   |
|                                    |   |   |  |   |                 |                   | □ No  |
| 3. <b>Do v</b>                     | our expenses include  |   |  |   |                 |                   | ☐ Yes   |
| expe                               | enses of people other th  |   | -  |   |                 |                   |   |
| your                               | self and your depende   | nts?  | es   |   |                 |                   |   |
| Part 2:                            | Estimate Your Ongoin  | ng Monthly E                                | Expenses                                       |   |                 |                   |   |
|                                    |   |   |  |   |                 |                   | pter 13 case to report f the form and fill in the |
| the value                          | xpenses paid for with roof such assistance and form 1061.)                  |   |  |   |                 | Your expe         | enses   |
| (Omolai i                          | O.I.I. 1001.)   |   |  |   |                 |                   |   |
|                                    | rental or home owners<br>nents and any rent for the                         |   | -  | nclude first mortgage                   | e<br>4. \$      |                   | 0.00  |
| If no                              | t included in line 4:   |   |  |   |                 |                   |   |
| 4a.                                | Real estate taxes   |   |  |   | 4a. \$          |                   | 266.00  |
| 4b.                                | Property, homeowner's   | -   |  |   | 4b. \$          |                   | 0.00  |
| 4c.                                | Home maintenance, re  |   |  |   | 4c. \$          |                   | 0.00  |
| 4d.<br>5. <b>Add</b> i             | Homeowner's associat<br>itional mortgage payme                              |   |  | me equity loans                         | 4d. \$<br>5. \$ |                   | 406.00<br>0.00                                    |
| J. Audi                            |   | , ioi youi                                  | . Julia in | no oquity toallo                        | υ. φ            |                   | U.UU  |

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| Debtor 1 Jean M Jones   | Case                                   | numbe  | er (if known) |                       |
|---|--|--------|---------------|-----------------------|
| 6. Utilities:   |  |        |               |                       |
| 6a. Electricity, heat, natural gas  |  | 6a. §  | \$            | 67.00                 |
| 6b. Water, sewer, garbage collection  |  |        | <u> </u>      | 0.00                  |
| 6c. Telephone, cell phone, Internet, satellite, and                                     |  | 6c. 9  | ·             | 0.00                  |
| 6d. Other. Specify: <b>Cell Phone</b>   |  | 6d. §  | ·             | 30.00                 |
| . Food and housekeeping supplies  |  |        | β             |                       |
|   |  |        | ·             | 240.00                |
|   |  |        | \$<br>\$      | 0.00                  |
| Clothing, laundry, and dry cleaning   |  |        | ·             | 20.00                 |
| ). Personal care products and services  |  |        | <b>.</b>      | 15.00                 |
| Medical and dental expenses   |  | 11. \$ | <b></b>       | 0.00                  |
| 2. <b>Transportation.</b> Include gas, maintenance, bus or t                            | rain fare.                             | 12. \$ | \$            | 90.00                 |
| Do not include car payments.  B. Entertainment, clubs, recreation, newspapers, m        |  | 13. \$ | ·             | 0.00                  |
| 4. Charitable contributions and religious donations                                     | _                                      |        | ·             |                       |
| •   |  | 14. \$ | <b></b>       | 0.00                  |
| <ol><li>Insurance.</li><li>Do not include insurance deducted from your pay or</li></ol> | included in lines 4 or 20              |        |               |                       |
| 15a. Life insurance   |  | 5a. §  | \$            | 0.00                  |
| 15b. Health insurance   |  | 5b. 9  | ·             | 0.00                  |
| 15c. Vehicle insurance  |  | 5с. S  |               | 125.00                |
|   |  | 5d. §  |               |                       |
| 15d. Other insurance. Specify:  |  | 5u. (  | P             | 0.00                  |
| <ol><li>Taxes. Do not include taxes deducted from your pay<br/>Specify:</li></ol>       |  | 16. 9  | \$            | 0.00                  |
| 7. Installment or lease payments:   |  |        |               | 0.00                  |
| 17a. Car payments for Vehicle 1   | 1                                      | 7a. §  | \$            | 0.00                  |
| 17b. Car payments for Vehicle 2   | 1                                      | 7b. §  | \$            | 0.00                  |
| 17c. Other. Specify:  | 1                                      | 7c. §  | \$            | 0.00                  |
| 17d. Other. Specify:  | 1                                      | 7d. §  | \$            | 0.00                  |
| Your payments of alimony, maintenance, and su   | pport that you did not report as       |        | •             |                       |
| deducted from your pay on line 5, Schedule I, Yo  | .a                                     | 18. \$ |               | 0.00                  |
| Other payments you make to support others who   |  |        | \$            | 0.00                  |
| Specify:  |  | 19.    |               |                       |
| Other real property expenses not included in line                                       |  |        |               |                       |
| 20a. Mortgages on other property  |  | 0a. §  | ·             | 0.00                  |
| 20b. Real estate taxes  |  | 0b. §  | ·             | 0.00                  |
| 20c. Property, homeowner's, or renter's insurance                                       |  | 0c. §  |               | 0.00                  |
| 20d. Maintenance, repair, and upkeep expenses   |  | 0d. \$ |               | 0.00                  |
| 20e. Homeowner's association or condominium du  | es 2                                   | 0e. §  | \$            | 0.00                  |
| . Other: Specify:   | :                                      | 21     | +\$           | 0.00                  |
| 2. Calculate your monthly expenses  |  |        |               |                       |
| 22a. Add lines 4 through 21.  |  |        | \$            | 1,259.00              |
| 22b. Copy line 22 (monthly expenses for Debtor 2),                                      | if any from Official Form 106 L-2      |        | \$            | 1,239.00              |
|   |  |        | ·             | 4 050 00              |
| 22c. Add line 22a and 22b. The result is your month                                     | nly expenses.                          |        | \$            | 1,259.00              |
| 3. Calculate your monthly net income.   |  |        |               |                       |
| 23a. Copy line 12 (your combined monthly income,  | ) from Schedule I. 23                  | 3a. \$ | \$            | 2,044.00              |
| 23b. Copy your monthly expenses from line 22c ab  | oove. 2                                | 3b     | -\$           | 1,259.00              |
|   |  | Г      |               |                       |
| 23c. Subtract your monthly expenses from your mo  |  | 3c. S  | \$            | 785.00                |
| The result is your <i>monthly net income</i> .  | 2                                      | JU. [  | *             |                       |
| 4. Do you expect an increase or decrease in your e                                      | xpenses within the year after you file | this f | orm?          |                       |
| For example, do you expect to finish paying for your car loa                            |  |        |               | or decrease because c |
| modification to the terms of your mortgage?   |  |        |               |                       |
| ■ No.   |  |        |               |                       |
| ☐ Yes. Explain here:  |  |        |               |                       |

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| Fill in this infor                  | rmation to identify your   | C250:                    |                            |                            |  |
|-------------------------------------|--|--------------------------|----------------------------|----------------------------|--|
|                                     |  | case.                    |                            |                            |  |
| Debtor 1                            | Jean M Jones First Name  | Middle Name              | Last Name                  |                            |  |
| Debtor 2                            | riist Naille   | Middle Name              | Last Name                  |                            |  |
| (Spouse if, filing)                 | First Name   | Middle Name              | Last Name                  |                            |  |
| United States Ba                    | ankruptcy Court for the:   | NORTHERN DISTRICT        | OF ILLINOIS                |                            |  |
| Case number (if known)              |  |                          |                            |                            | ☐ Check if this is an amended filing                               |
| Official For                        |  | ın Individual            | Debtor's Sc                | hedules                    | 12/15  |
| obtaining mone<br>years, or both. 1 |  | n connection with a bank |                            |                            | nt, concealing property, or<br>r imprisonment for up to 20         |
| Did you pa                          | ay or agree to pay some  | one who is NOT an attor  | ney to help you fill out b | ankruptcy forms?           |  |
| ■ No                                |  |                          |                            |                            |  |
| ☐ Yes.                              | Name of person   |                          |                            |                            | tcy Petition Preparer's Notice,<br>d Signature (Official Form 119) |
| that they a                         | alty of perjury, I declare<br>re true and correct.<br>an M Jones | that I have read the sum | mary and schedules filed   | d with this declaration ar | nd   |
|                                     | M Jones  |                          | Signature of I             | Debtor 2                   |  |
| Signatu                             | ure of Debtor 1  |                          |                            |                            |  |

Date \_\_\_\_\_

Date March 7, 2018

| HII                                | in this inform        | nation to identify you                                 |   |   |  |   |  |  |
|------------------------------------|-----------------------|--|---|---|--|---|--|--|
|                                    | tor 1                 |  | cuse.   |   |  |   |  |  |
| Den                                | itor i                | Jean M Jones First Name                                | Middle Name   | Last Name   |  |   |  |  |
|                                    | tor 2                 | First Name   | Middle News   | LastMana  |  |   |  |  |
|                                    | use if, filing)       | First Name   | Middle Name   | Last Name   |  |   |  |  |
| Unit                               | ed States Bar         | kruptcy Court for the:                                 | NORTHERN DISTRICT (                                     | OF ILLINOIS   |  |   |  |  |
| Case number                        |                       |  |   |   |  | ☐ Check if this is an amended filing                  |  |  |
| Sta<br>Be a<br>infor               | s complete a          | of Financial And accurate as possione space is needed, | ble. If two married people a attach a separate sheet to |   | ankruptcy equally responsible for sup                          |   |  |  |
|                                    |                       | ). Answer every ques                                   |   | L ived Refere   |  |   |  |  |
|                                    |                       | current marital statu                                  | rital Status and Where You                              | i Lived Belore  |  |   |  |  |
|                                    | ☐ Married ■ Not marri |  |   |   |  |   |  |  |
| 2.                                 | During the la         | ıst 3 years, have you                                  | lived anywhere other than                               | where you live now?   |  |   |  |  |
|                                    | _                     |  | •   | ·   |  |   |  |  |
|                                    | ■ No<br>□ Yes. List   | all of the places you li                               | ived in the last 3 years. Do n                          | ot include where you live now   | ·  |   |  |  |
|                                    | Debtor 1 Pri          | or Address:  | Dates Debtor 1 lived there                              | Debtor 2 Prior Ad   | dress:   | Dates Debtor 2<br>lived there                         |  |  |
|                                    |                       |  |   |   | ity property state or territory<br>co, Texas, Washington and W |   |  |  |
|                                    | ■ No<br>□ Yes. Ma     | ke sure you fill out <i>Sch</i>                        | nedule H: Your Codebtors (O                             | fficial Form 106H).   |  |   |  |  |
| Part                               | Explain               | n the Sources of You                                   | r Income  |   |  |   |  |  |
|                                    | Fill in the tota      | I amount of income yo                                  | u received from all jobs and                            | ng a business during this yeall businesses, including partetogether, list it only once ur |  | ndar years?   |  |  |
|                                    | □ No<br>■ Yes. Fill   | in the details.  |   |   |  |   |  |  |
|                                    |                       |  | Debtor 1  |   | Debtor 2   |   |  |  |
|                                    |                       |  | Sources of income<br>Check all that apply.              | Gross income<br>(before deductions and<br>exclusions)                                     | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |  |  |
| the date you tiled for hankruntey: |                       | ■ Wages, commissions, bonuses, tips                    | \$1,007.75  | ☐ Wages, commissions, bonuses, tips   |  |   |  |  |
|                                    |                       |  | ☐ Operating a business                                  |   | ☐ Operating a business   |   |  |  |

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|   |  |  |  | Debtor 1   |  |  | Debtor 2                                 |                           |   |
|---|--|--|--|--|--|--|--|---------------------------|---|
|   |  |  |  | Sources of income<br>Check all that apply.   |  | s income<br>e deductions and<br>sions)                               | Sources of inc<br>Check all that a       |                           | Gross income<br>(before deductions<br>and exclusions) |
| For last calendar year:<br>(January 1 to December 31, 2017) |  | ■ Wages, commissions, bonuses, tips          |  | \$20,760.00  | ☐ Wages, combonuses, tips              | missions,  |  |                           |   |
|   |  |  |  | ☐ Operating a business   |  |  | ☐ Operating a                            | business                  |   |
|   |  | dar year be<br>December                      |  | ■ Wages, commissions, bonuses, tips  |  | \$21,391.00  | ☐ Wages, combonuses, tips                | imissions,                |   |
|   |  |  |  | ☐ Operating a business   |  |  | ☐ Operating a                            | business                  |   |
| ;   | Include includ | come regard<br>public bene<br>If you are fil | dless of wheth<br>fit payments;<br>ing a joint cas<br>the gross inco | e during this year or the two<br>ner that income is taxable. Ex-<br>pensions; rental income; inte-<br>se and you have income that your<br>ome from each source separa  | amples of<br>rest; divid<br>you receiv | other income are a<br>ends; money collect<br>yed together, list it c | ted from lawsuits;<br>only once under Do | royalties; an<br>ebtor 1. |   |
|   |  |  |  | Debtor 1   |  |  | Debtor 2                                 |                           |   |
|   |  |  |  | Sources of income<br>Describe below.   | each                                   | s income from<br>source<br>e deductions and<br>iions)                | Sources of inc<br>Describe below         |                           | Gross income<br>(before deductions<br>and exclusions) |
|   |  | y 1 of curre<br>filed for bai                | nt year until<br>nkruptcy:   | Rental income  |  | \$600.00   |  |                           |   |
|   |  | dar year:<br>December                        | 31, 2017 )   | Rental income  |  | \$1.00   |  |                           |   |
|   |  | dar year be<br>December                      |  | Rental income  |  | \$0.00   |  |                           |   |
| Part  | : 3: Liet  | t Cartain Pa                                 | nyments Vou  | Made Before You Filed for  | Bankrun                                | tov  |  |                           |   |
|   |  |  |  |  |  | icy  |  |                           |   |
|   | Are eithei<br>□ No.  | Neither D                                    | ebtor 1 nor D  | or 2's debts primarily consumer debts?  or Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an or a personal, family, or household purpose."  |  |  |  |                           |   |
|   |  | During the                                   | 90 days befo   | ore you filed for bankruptcy, d  | id you pay                             | any creditor a tota  | l of \$6,425* or mo                      | re?                       |   |
|   |  | □ Yes  | paid that cr   | each creditor to whom you pa<br>editor. Do not include paymer  | nts for do                             | mestic support oblig   |  |                           |   |
|   |  | * Subject                                    |  | payments to an attorney for t<br>t on 4/01/19 and every 3 year   |  |  | or after the date of                     | f adjustment              | t.  |
|   | Yes.   |  |  | 2 or both have primarily consumer debts.  Defore you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  |  |  |  |                           |   |
|   |  | ■ No.  | Go to line 7   |  |  |  |  |                           |   |
|   |  | □ Yes  | include pay  | w each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not<br>payments for domestic support obligations, such as child support and alimony. Also, do not include payments to<br>for this bankruptcy case. |  |  |  |                           |   |
|   | Creditor'  | 's Name an                                   | d Address  | Dates of payme   | ent                                    | Total amount   | Amount you still owe                     | Was this                  | payment for   |

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| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No  Yes. List all payments to an insider. |                                |                                |                      |                                      |                            |  |  |
|-----|--|--------------------------------|--------------------------------|----------------------|--------------------------------------|----------------------------|--|--|
|     | Insider's Name and Address   | Dates of payment               | Total amount paid              | Amount you still owe | Reason for                           | this payment               |  |  |
| 8.  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.  |                                |                                |                      |                                      |                            |  |  |
|     | ☐ Yes. List all payments to an insider   |                                |                                |                      |                                      |                            |  |  |
|     | Insider's Name and Address   | Dates of payment               | Total amount paid              | Amount you still owe | Reason for Include credi             | this payment<br>tor's name |  |  |
| Par | rt 4: Identify Legal Actions, Repossession   | s and Foroclosures             |                                |                      |                                      |                            |  |  |
| Га  | 14. Identify Legal Actions, Repossession   | s, and Foreclosures            |                                |                      |                                      |                            |  |  |
| 9.  | Within 1 year before you filed for bankrupto<br>List all such matters, including personal injury<br>modifications, and contract disputes.  |                                |                                |                      |                                      |                            |  |  |
|     |  |                                |                                |                      |                                      |                            |  |  |
|     | Yes. Fill in the details.  | N. c. cd                       | •                              |                      | 0                                    |                            |  |  |
|     | Case title<br>Case number  | Nature of the case             | Court or agency                |                      | Status of the case                   |                            |  |  |
|     | Park of River Oaks Condominium<br>Association 1A Vs. Jean M Jones<br>2017 M6 004535  | Forcible Entry and<br>Detainer | Circuit Court of<br>County, IL | Cook                 | Pending On appe Conclude Entry of Or | ed<br>r <b>der for</b>     |  |  |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11.  □ Yes. Fill in the information below.   |                                | rty repossessed, fo            | oreclosed, garnis    | shed, attached                       | , seized, or levied?       |  |  |
|     | Creditor Name and Address  | Describe the Property          |                                | Date                 |                                      | Value of the               |  |  |
|     |  | Fundain what hannoned          |                                |                      |                                      | property                   |  |  |
|     | Explain what happened  |                                |                                |                      |                                      |                            |  |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No  ☐ Yes. Fill in the details.   |                                | uding a bank or fin            | ancial institutior   | n, set off any a                     | mounts from your           |  |  |
|     | Creditor Name and Address  | Describe the action the        | creditor took                  | Date<br>taker        | action was                           | Amount                     |  |  |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an □ No □ Yes   |                                | rty in the possession          |                      |                                      | fit of creditors, a        |  |  |

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| Pa  | t 5: List Certain Gifts and Contributions  |  |                                   |                          |  |  |  |  |
|-----|--|--|-----------------------------------|--------------------------|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift. |  |                                   |                          |  |  |  |  |
|     | Gifts with a total value of more than \$600 per person   | Describe the gifts   | Dates you gave the gifts          | Value                    |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  |  |                                   |                          |  |  |  |  |
| 14. | Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co  | ptcy, did you give any gifts or contributions with a totantribution.   | al value of more than             | \$600 to any charity?    |  |  |  |  |
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code)                                   |  | Dates you contributed             | Value                    |  |  |  |  |
| Pa  | tt 6: List Certain Losses  |  |                                   |                          |  |  |  |  |
| 15. | or gambling?   | tcy or since you filed for bankruptcy, did you lose any  | thing because of thef             | t, fire, other disaster, |  |  |  |  |
|     | Yes. Fill in the details.  | Describe any incurance soverage for the loss   | Data of your                      | Value of property        |  |  |  |  |
|     | how the loss occurred  | Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property. | Date of your loss                 | lost                     |  |  |  |  |
| Pa  | rt 7: List Certain Payments or Transfers   |  |                                   |                          |  |  |  |  |
| 16. | consulted about seeking bankruptcy or p  | tcy, did you or anyone else acting on your behalf pay or<br>reparing a bankruptcy petition?<br>eparers, or credit counseling agencies for services require |                                   | rty to anyone you        |  |  |  |  |
|     | <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>   |  |                                   |                          |  |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo   | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment        |  |  |  |  |
|     | Ledford, Wu & Borges, LLC<br>105 W. Madison<br>23rd Floor<br>Chicago, IL 60602<br>notice@billbusters.com   | \$630.00 paid for Attorney Fees in prior case filing: 17-27621.  | 09/2017 to<br>02/2018             | \$630.00                 |  |  |  |  |
|     | CIN Legal Data Services<br>4540 Honeywell Ct<br>Dayton, OH 45424   | \$60.00 paid for merged, multi-bureau credit report, credit counseling and debtor education courses in prior case: 17-27621.                               | 09/2017                           | \$60.00                  |  |  |  |  |

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Debtor 1 Jean M Jones

| 17. | Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you   | ors or to make payments   |                             |                      | r transfer any prope                                | rty to anyone who                             |
|-----|--|---|-----------------------------|----------------------|---|---|
|     | ☐ Yes. Fill in the details.  |   |                             |                      |   |   |
|     | Person Who Was Paid<br>Address   | Description and v transferred                                       | alue of any prope           | erty                 | Date payment or transfer was made                   | Amount of payment                             |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread  No | usiness or financial affa<br>ade as security (such as t             | irs?<br>he granting of a se |                      | • •   |   |
|     | ☐ Yes. Fill in the details.  |   |                             |                      |   |   |
|     | Person Who Received Transfer Address   | Description and v property transferr                                |                             |                      | any property or received or debts change            | Date transfer was made                        |
|     | Person's relationship to you   |   |                             |                      |   |   |
| 19. |  | _ 100   |                             | st or similar device | of which you are a                                  |   |
|     |  | Description and o   | al af tha muana             |                      | I   | Data Transfer was                             |
|     | Name of trust  | Description and v   | alue of the prope           | rty transferre       | ea  | Date Transfer was made                        |
|     |  |   |                             |                      |   | made  |
| Par | 8: List of Certain Financial Accounts, Ins   | struments, Safe Deposit   | Boxes, and Stora            | age Units            |   |   |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated No                         | or other financial accour   | nts; certificates of        |                      |   |   |
|     | ☐ Yes. Fill in the details.  |   |                             |                      |   |   |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)   | Last 4 digits of account number                                     | Type of account instrument  | clo:<br>mo           | te account was<br>sed, sold,<br>ved, or<br>nsferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables?  | year before you filed for   | bankruptcy, any             | safe deposit         | box or other depos                                  | itory for securities,                         |
|     | No   |   |                             |                      |   |   |
|     | Yes. Fill in the details.  |   |                             |                      |   |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, State and ZIP Code)            |                             | escribe the o        | contents  | Do you still have it?                         |
| 22. | Have you stored property in a storage unit o   | or place other than your  | home within 1 ye            | ear before yo        | u filed for bankrupto                               | ey?   |
|     | ■ No   |   |                             |                      |   |   |
|     | Yes. Fill in the details.  |   |                             |                      |   |   |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  | Who else has or h<br>to it?<br>Address (Number, State and ZIP Code) |                             | escribe the o        | contents  | Do you still have it?                         |
|     |  | ·   |                             |                      |   |   |

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Debtor 1 Jean M Jones

| Pai | t 9: Identify Property You Hold or Control for S   | omeone Else  |         |                                     |                       |  |
|-----|--|--|---------|-------------------------------------|-----------------------|--|
| 23. | 3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.        |  |         |                                     |                       |  |
|     | No   |  |         |                                     |                       |  |
|     | ☐ Yes. Fill in the details.  |  |         |                                     |                       |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)          | De      | scribe the property                 | Value                 |  |
| Pai | t 10: Give Details About Environmental Informat  | tion   |         |                                     |                       |  |
| For | the purpose of Part 10, the following definitions a  | pply:  |         |                                     |                       |  |
|     | Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances. | , land, soil, surface water, groui   | _       |                                     |                       |  |
|     | Site means any location, facility, or property as d to own, operate, or utilize it, including disposal s   |  | I law,  | whether you now own, operate, o     | or utilize it or used |  |
|     | Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si  |  | ıs wa   | ste, hazardous substance, toxic s   | ubstance,             |  |
| Rep | ort all notices, releases, and proceedings that you  | u know about, regardless of who  | en the  | ey occurred.                        |                       |  |
| 24. | Has any governmental unit notified you that you  | may be liable or potentially liab  | le un   | der or in violation of an environme | ental law?            |  |
|     | <b>-</b>   |  |         |                                     |                       |  |
|     | ■ No □ Yes. Fill in the details.   |  |         |                                     |                       |  |
|     | Name of site   | Governmental unit  |         | Environmental law, if you           | Date of notice        |  |
|     | Address (Number, Street, City, State and ZIP Code)   | Address (Number, Street, City, State a ZIP Code)                                 | ind     | know it                             | Date of Helios        |  |
| 25. | Have you notified any governmental unit of any r   | elease of hazardous material?  |         |                                     |                       |  |
|     | No   |  |         |                                     |                       |  |
|     | Yes. Fill in the details.  |  |         |                                     |                       |  |
|     | Name of site Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State a<br>ZIP Code)         | ınd     | Environmental law, if you know it   | Date of notice        |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.                              |  |         |                                     |                       |  |
|     | ■ No   |  |         |                                     |                       |  |
|     | ☐ Yes. Fill in the details.  |  |         |                                     |                       |  |
|     | Case Title Case Number   | Court or agency<br>Name<br>Address (Number, Street, City,<br>State and ZIP Code) | Na      | ture of the case                    | Status of the case    |  |
|     |  | ŕ  |         |                                     |                       |  |
| Pai | t 11: Give Details About Your Business or Conn   | ections to Any Business  |         |                                     |                       |  |
| 27. | Within 4 years before you filed for bankruptcy, di   | id you own a business or have a  | any of  | the following connections to any    | business?             |  |
|     | ☐ A sole proprietor or self-employed in a tra  | ade, profession, or other activity   | y, eith | ner full-time or part-time          |                       |  |
|     | ☐ A member of a limited liability company (  | LLC) or limited liability partners   | hip (I  | _LP)                                |                       |  |
|     | ☐ A partner in a partnership   |  |         |                                     |                       |  |
|     | ☐ An officer, director, or managing executiv   | ve of a corporation  |         |                                     |                       |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |         |                                     |                       |  |

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|                     | ■ No. None of the above applies. Go to P  | Part 12.  |   |  |  |  |  |
|---------------------|---|---|---|--|--|--|--|
|                     | Yes. Check all that apply above and fill in the details below for each business.        |   |   |  |  |  |  |
|                     | Business Name<br>Address  | Describe the nature of the business             | Employer Identification number Do not include Social Security number or ITIN.                                   |  |  |  |  |
|                     | (Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper                | Dates business existed  |  |  |  |  |
|                     | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. | cy, did you give a financial statement to an    | yone about your business? Include all financial   |  |  |  |  |
|                     | ■ No<br>□ Yes. Fill in the details below.   |   |   |  |  |  |  |
|                     | Name<br>Address<br>(Number, Street, City, State and ZIP Code)                           | Date Issued                                     |   |  |  |  |  |
| Par                 | 12: Sign Below  |   |   |  |  |  |  |
| are t               |   | false statement, concealing property, or ob     | eclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both. |  |  |  |  |
|                     | Jean M Jones  |   |   |  |  |  |  |
|                     | n M Jones<br>nature of Debtor 1   | Signature of Debtor 2                           |   |  |  |  |  |
| Date                | March 7, 2018   | Date  |   |  |  |  |  |
| Did y<br>■ N<br>□ Y | <del>-</del>  | nt of Financial Affairs for Individuals Filing  | for Bankruptcy (Official Form 107)?   |  |  |  |  |
| Did y<br>■ N        | you pay or agree to pay someone who is not  | an attorney to help you fill out bankruptcy     | forms?  |  |  |  |  |
| _                   | <del>-</del>  | otcy Petition Preparer's Notice, Declaration, a | nd Signature (Official Form 119).   |  |  |  |  |

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: |    | Liquidation        |
|------------|----|--------------------|
| \$24       | 45 | filing fee         |
| \$7        | 75 | administrative fee |
| + \$       | 15 | trustee surcharge  |
| \$33       | 35 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - By agreement of the parties for prepetition and preconfirmation work, including consultation, drafting petition and plan, 341 meeting, negotiation with creditors, court hearings, amendments etc.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00.

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: March 7, 2018                   | 3                            |
|---------------------------------------|------------------------------|
| Signed:                               |                              |
| /s/ Jean M Jones                      | /s/ Kevin D. Rouse ARDC      |
| Jean M Jones                          | Kevin D. Rouse ARDC #6284394 |
|                                       | Attorney for the Debtor(s)   |
| Debtor(s)                             |                              |
| Do not sign this agreement if the ame | ounts are blank.             |

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

| In r | e Jean M Jones   |   | Case No.                               |   |
|------|--|---|--|---|
|      |  | Debtor(s)   | Chapter                                | 13  |
|      | DISCLOSURE OF COMPI  | ENSATION OF ATTOR   | NEY FOR DE                             | EBTOR(S)                                    |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation   | ing of the petition in bankruptcy, or   | r agreed to be paid                    | to me, for services rendered or to          |
|      | For legal services, I have agreed to accept  |   | . \$                                   | 4,000.00                                    |
|      | Prior to the filing of this statement I have received  | 1   | . \$                                   | 0.00  |
|      | Balance Due  |   | . \$                                   | 4,000.00                                    |
| 2.   | \$310.00_ of the filing fee has been paid.   |   |  |   |
| 3.   | The source of the compensation paid to me was:   |   |  |   |
|      | ■ Debtor □ Other (specify):  |   |  |   |
| 4.   | The source of compensation to be paid to me is:  |   |  |   |
|      | ■ Debtor □ Other (specify):  |   |  |   |
| 5.   | ■ I have not agreed to share the above-disclosed com   | npensation with any other person ur   | nless they are mem                     | bers and associates of my law firm.         |
|      | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n   |   |  |   |
| 6.   | In return for the above-disclosed fee, I have agreed to  | render legal service for all aspects of   | of the bankruptcy c                    | ase, including:                             |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, state.</li> <li>c. Representation of the debtor at the meeting of credid. [Other provisions as needed]</li> <li>Exemption planning; preparation and filing of motions pursuant to 11 US</li> </ul> | atement of affairs and plan which n<br>itors and confirmation hearing, and<br>filing of reaffirmation agreeme | nay be required;<br>any adjourned hear | rings thereof; tions as needed; preparation |
| 7.   | By agreement with the debtor(s), the above-disclosed f<br>Representation of the debtors in any d   |   |  | y proceeding.                               |
|      |  | CERTIFICATION   |  |   |
| this | I certify that the foregoing is a complete statement of a bankruptcy proceeding.   | ny agreement or arrangement for p   | ayment to me for re                    | epresentation of the debtor(s) in           |
|      | March 7, 2018  | /s/ Kevin D. Rouse  |  |   |
| 7    | Date   | Kevin D. Rouse AR   | DC #6284394                            |   |
|      |  | Signature of Attorney<br>Ledford, Wu & Bor  | ges, LLC                               |   |
|      |  | 105 W. Madison  | -                                      |   |
|      |  | 23rd Floor<br>Chicago, IL 60602   |  |   |
|      |  | 312-853-0200 Fax:   |  |   |
|      |  | notice@billbusters  Name of law firm  | .com                                   |   |
| 1    |  | ivame oj iaw jirili   |  |   |

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### BILLBUSTERS Ledford, Wu and Borges, LLC

105 W. Madison, 23<sup>rd</sup> Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

#### **CONSULTATION AGREEMENT**

| dinii.   | OR O  | FFICI     | E USI |     |
|--|-------|-----------|-------|-----|
| Client 1   | Vo    | 12        | 13/   | 19_ |
| Intervie   | wing. | Attorn    | iev:  |     |
| the contract of the contract o |       |           |       |     |
| Date:  | G.    | - J       | 17    | 7   |
| Date:_   | q.    | <b>%-</b> | -[=   | 7   |

#### THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

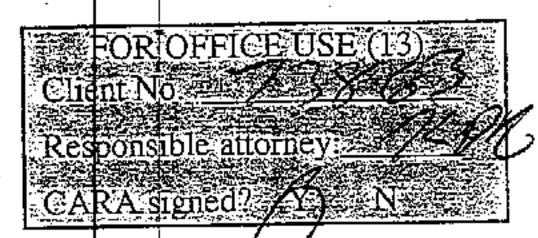
- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
  - a. analyzing Client's financial circumstances based on information provided by Client;
  - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
  - c. if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's options, informing Client what additional information Client needs to provide in order to enable Attorney to provide such advice and information;
  - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
  - to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

| 5. Fees (check one):   |   |
|--|---|
| A consultation fee will be waived if Client decides not to retain Attorney relationship shall terminate at the conclusion of the interview   | , in which case the attorney-client   |
| Client agrees to pay \$ in nonrefundable consultation fee  |   |
| In the event Client decides to retain Attorney, this consultation becomes billable and is the case, and a new written contract, as well as a Court-Approved Retention Agreem Client and Attorney, which shall supersede this agreement. The new agreement(s) will of the parties' obligations and a breakdown of the costs.  6. Acknowledgement: Client acknowledges that the first date upon which Attorney proclient is the date noted above, and that Attorney provided Client with a copy of this information mandated by Section 527(b) of the Bankruptcy Code. | ent if applicable, must be signed by<br>l also provide a détailed explanation<br>rovided any bankruptcy assistance to |
|  | Date: Q 1B 1Z019-   |
| Attorney Signature: ARDC #:  |   |
|  |   |

# LEDFORD, WU & BORGES, LLC.

105 W. Madison, 23<sup>rd</sup> Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

# ATTORNEY RETENTION CONTRACT



| 1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means Ledf   | brd, | Wu & Borges, LLC and     |
|--|------|--------------------------|
| 1. Parties. In this contract, "Client means the undersigned, both many and jointally, and the parties to the exits staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the ex | tent | of inconsistency. In the |
| its staff attorneys. This contract shall supersede any prior contracts and agreements between the latter shall   | i pr | evail                    |
| event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter sha  | r Pr |                          |

| event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail.  |
|---|
| 2. Services: Client retains Attorney for the following services: ☑ Chapter 13 bankruptcy (debt adjustment)  |
| 3. Scope of Representation:  (a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1) adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify):  |
| 4. Fees: Legal fee: \$  |
| 5. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial):  The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4  A Chapter 13 plan will be submitted to the Court in good faith. The plan payment may have to increase if creditor claims come in higher than scheduled, creditors successfully argue that they are entitled to a higher interest rate, the Trustee successfully argues that the budgeted income is lower than actual income, the Trustee successfully argues that budgeted expenses are unreasonably high or the Court makes a finding that the plan is not the best effort you can make to repay your creditors  TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney  Other (specify):  Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed. |
| <ul> <li>6. Client's Duties. Client agrees, during the course of representation, to:</li> <li>(a) provide Attorney with full, accurate and timely information, financial and otherwise;</li> <li>(b) follow Attorney's procedures and cooperate with Attorney in providing requested documents and information;</li> <li>(c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty;</li> <li>(d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit; and</li> <li>(e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.</li> </ul>  |
| 7. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this case, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.   |
| 8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney   |

8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the owner of the may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.

Attorney Signature: 2 24394

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## **United States Bankruptcy Court**Northern District of Illinois

| In re | Jean M Jones                               |   | Case No.             |                          |
|-------|--|---|----------------------|--------------------------|
|       |  | Debtor(s)   | Chapter              | 13                       |
|       | VE   | RIFICATION OF CREDITOR N                            | MATRIX               |                          |
|       |  | Number of   | f Creditors:         | 27                       |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred               | itors is true and co | orrect to the best of my |
| Date: | March 7, 2018                              | /s/ Jean M Jones  Jean M Jones  Signature of Debtor |                      |                          |

Aaron's Furniture 3359 Chicago Rd. Chicago Heights, IL 60412

Aaron's Furniture 654 Torrence Avenue Calumet City, IL 60409

Americash Loans 880 Lee Street Suite 302 Des Plaines, IL 60016

Americash Loans PO Box 184 Des Plaines, IL 60016

Belmont Realty Corp 5341 W. Belmont Ave 29-24-100-018-1091 Chicago, IL 60641

Comcast 1255 W. North Ave. Chicago, IL 60622

ComEd
3 Lincoln Center
Attn: Bkcy Group-Claims Department
Oakbrook Terrace, IL 60181

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Cook County Clerk's Office 118 N. Clark St., Room 434 29-24-100-018-1091 Chicago, IL 60602

Cook County Treasurer 118 North Clark Street, Suite 112 29-24-100-018-1091 Chicago, IL 60602 Credit Management, LP
The Offices of Credit Management, LP
Po Box 118288
Carrolton, TX 75011

Healthcare Assoc Cr Un 1151 E Warrenville Rd Naperville, IL 60563

Herman Houston 13314 S. Eberhart Riverdale, IL 60827

Illinois Attorney General 100 W. Randolph Street 9th Floor Chicago, IL 60601

Illinois Department of Revenue Bankruptcy Section P.O.Box 64338 Chicago, IL 60664-0338

Illinois Department of Revenue P.O. Box 19006 Springfield, IL 62794

Internal Revenue Serivce P.O. Box 7346 Philadelphia, PA 19101-7346

IRS c/o Centralized Insolvency Operatio P.O.Box 21126 Philadelphia, PA 19114

Kovitz, Shifrin & Nesbit 750 Lake Cook Road, Suite 350 2017 M6 004535 Buffalo Grove, IL 60089

Kovitz, Shifrin & Nesbit 170 N. Archer 2017 M6 004535 Mundelein, IL 60060 Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Overlnd Bond 4701 W. Fullerton Ave. Chicago, IL 60639

Park of River Oaks 1A PO Box 4653 Hinsdale, IL 60522

Park of River Oaks Homeowners Assoc c/o Kovitz Shifrin Nesbit 175 N. Archer Ave. Mundelein, IL 60060

Parks River Oaks HOA Advanced Property Specialist PO Box 7704 Carol Stream, IL 60197-7704

Roy Chew c/o Michael Maksimovich 8643 W. Ogden Lyons, IL 60534

Seventh Avenue, Inc 1112 7th Ave Monroe, WI 53566